



# IDA Annual Compliance Report State Sales Tax Recapture

For IDA fiscal year ending 12 31 19  
(mmdyy)

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

### IDA information

|                                                              |             |                                      |
|--------------------------------------------------------------|-------------|--------------------------------------|
| Name of IDA<br>Columbia County Industrial Development Agency |             |                                      |
| Street address<br>One Hudson City Centre, Suite 301          |             | Telephone number<br>( 518 ) 828-4718 |
| City<br>Hudson                                               | State<br>NY | ZIP code<br>12534                    |

### Terms and conditions for the recapture of state sales tax exemption benefits for projects established, amended, or extended on or after March 28, 2013

- 1 Did the IDA provide state sales tax exemption benefits to any project established, amended, or extended during the fiscal year entered above? ..... 1 Yes  No   
If Yes, continue below.  
If No, skip to question 3.
- 2 When an IDA establishes a project, appoints an agent/project operator, or amends or extends a project established in a prior year, the IDA must include terms and conditions for the recapture of state sales tax exemption benefits in its resolutions and project documents. This applies to all projects established, amended, or extended on or after March 28, 2013 (see instructions).  
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 identify the projects to which each version of the terms and conditions relate.  
If the IDA did not include terms and conditions for the recapture of state sales tax exemption benefits in the project documents, attach a list of these projects (see instructions).

### Activities and efforts to recapture state sales tax exemption benefits for projects established, amended, or extended on or after March 28, 2013

- 3 Did the IDA make efforts to recapture any state sales and use tax exemption benefits from an agent, project operator, or other person or entity (see instructions)? ..... 3 Yes  No   
If Yes, continue below.  
If No, skip question 4 and complete the Certification below.
- 4 Did the IDA file Form ST-65, IDA Report of Recaptured Sales and Use Tax Benefits, for each recapture, and remit the funds to the Tax Department? ..... 4 Yes  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).

### Certification

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                 |                                                                               |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|-------------------------------------------------------------------------------|
| I certify that the above statements are true, complete, and correct, and that no material information has been omitted. I make these statements with the knowledge that willfully providing false or fraudulent information with this document may constitute a felony or other crime under New York State Law, punishable by a substantial fine and possible jail sentence. I also understand that the Tax Department is authorized to investigate the validity of any information entered on this document. |                 |                                                                               |
| Print name of person signing on behalf of the IDA<br>F. Michael Tucker                                                                                                                                                                                                                                                                                                                                                                                                                                        |                 | Print title of person signing on behalf of the IDA<br>Administrative Director |
| Signature<br>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | Date<br>2-19-20 | Telephone number<br>( 518 ) 828-4718                                          |

### Mailing instructions

Mail completed form and attachments to:

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

If not using U.S. Mail, see Publication 55, Designated Private Delivery Services.