



TAX COMMISSION OF THE CITY OF NEW YORK
1 Centre Street, Room 2400, New York, NY 10007

HIGH VALUE
 COPY

TC 203
2020/21

**INCOME AND EXPENSE SCHEDULE
FOR COOPERATIVE AND CONDOMINIUM PROPERTY**

ATTACH TO AN APPLICATION. TC203 IS NOT VALID IF FILED SEPARATELY. READ INSTRUCTIONS BEFORE YOU BEGIN.
COMPLETE ALL PARTS OF THE FORM. ANSWER YES OR NO TO QUESTIONS MARKED **◆**.
ALL INCOME FROM THE PROPERTY, WHATEVER ITS SOURCE, MUST BE REPORTED.

1a. PROPERTY IDENTIFICATION - Cooperative property				
BOROUGH (Bronx, Brooklyn, Manhattan, Queens or Staten Island)	BLOCK	LOT	TAX COMM. GROUP NO. 5	ASSESSMENT YEAR 2020/21
<p>◆ Does this schedule cover more than one tax lot? _____ If yes, state total number of lots _____, and list block and lot numbers: Block _____ Lots _____ Block _____ Lots _____ Block _____ Lots _____ Block _____ Lots _____</p> <p>Check if applicable: <input type="checkbox"/> Additional lots are listed on page _____ <input type="checkbox"/> All lots are contiguous. <input type="checkbox"/> All lots are operated by same corporation.</p> <p>◆ Does this schedule report occupancy and income for the entire tax lot (or lots)? _____ If no, describe portions not covered and reason for omission: _____</p>				
1b. PROPERTY IDENTIFICATION - Condominium property				
<p>◆ Does this schedule report the condominium association's income and expenses for the entire condominium? _____ If no, explain _____ _____ If the condominium has lots on other tax blocks, list block numbers _____</p> <p>◆ Does any person own more than six nonresidential units? _____ If yes, specify: Owner _____ Number of units _____ Type of occupancy _____ _____</p>				
2. CURRENT YEAR REPORTING PERIOD AND ACCOUNTING BASIS OF COOPERATIVE OR CONDOMINIUM				
<p>Current year reporting period: From _____ / _____ / _____ to _____ / _____ / _____ Accounting basis: <input type="checkbox"/> Cash <input type="checkbox"/> Accrual</p> <p>Has the accounting basis changed from the prior reporting period? Y _____ N _____</p>				
3. COOPERATIVE OR CONDOMINIUM OPERATION				
NUMBER OF APARTMENTS	TOTAL NUMBER OF COOP SHARES	YEAR OF FIRST CLOSING ON SALE OF UNITS TO PERSONS UNRELATED TO THE SPONSOR		
<p>◆ Does the coop/condo own units other than a superintendent's apartment? _____ If yes, specify the number of residential units: Occupied _____ Vacant _____, and the number of commercial units: Occupied _____ Vacant _____. Report the income from renting these units in part 8. Do NOT include these units as unsold units in part 4.</p> <p>◆ Does the cooperative or condominium provide residents with electricity? _____</p> <p>◆ Is the property subject to a program of restrictions on the income of residents or resale of units? _____ If yes, name of program: _____ and scheduled year of expiration of restrictions: _____</p> <p>◆ Are there any unsold units? _____ If yes, Part 4 must be completed.</p>				
4. INFORMATION OBTAINED FROM SPONSOR OR OTHER HOLDER OF UNSOLD UNITS				
NUMBER OF OCCUPIED UNSOLD UNITS REGULATED:	NUMBER OF OCCUPIED UNSOLD UNITS UNREGULATED:	NUMBER OF VACANT UNSOLD UNITS	TOTAL NUMBER OF UNSOLD UNITS	
MONTHLY RENT UNSOLD UNITS (REGULATED) \$ _____	MONTHLY RENT UNSOLD UNITS (UNREGULATED) \$ _____	TOTAL MONTHLY RENT PAYABLE (INCL. VAC.) \$ _____	NUMBER OF UNSOLD (COOP) SHARES	
<p>◆ Does the sponsor retain control of the board? _____</p>			SPECIFY SOURCE AND MONTH OF INFORMATION	
5. NONRESIDENTIAL USES AS OF JANUARY 5, 2020				
<p>Complete this section if the cooperative or condominium has nonresidential space, such as professional offices, stores or a garage which is open to nonresidents. For cooperatives describe the entire property. For condominiums describe space in a common element or units owned by the association.</p> <p>◆ Does the cooperative or condominium have any such nonresidential space? _____ If yes, answer the following questions, as of January 5, 2020. For questions answered "yes", you must provide details on the reverse page, as indicated.</p> <p>Are cooperative shares allocated to professional offices or other nonresidential units? _____ If yes, number shares _____ Is any of the space leased (other than proprietary leases)? _____ If yes, complete Part 8 on reverse. Is there a master lease for the commercial space? _____ If yes, complete Part 8 on reverse. Is space leased to the sponsor or a related person? _____ If yes, complete Part 8 on reverse. Was any of the commercial space vacant on January 5, 2020? _____ If yes, complete Part 11 on reverse.</p>				

6. INCOME FROM COOPERATIVE OR CONDOMINIUM OPERATION					BOROUGH/BLOCK/LOT	
Report income from unit owners, rental income, and other non-rental operating income here. For each category, include all escalations and other charges under the terms of any lease. You must itemize rental income in Part 8 according to use, floor, number of tenants, area and type of lease (master lease or sponsor lease, and direct leases between the cooperative or condominium and the occupants). You must itemize non-rental operating income in Part 9.						
					PRIOR YEAR	CURRENT YEAR
INCOME FROM UNIT OWNERS (Maintenance/Common charges)						
TOTAL RENTAL INCOME (Itemize in Part 8 below)						
OTHER NON-RENTAL OPERATING INCOME (Itemize in Part 9 below)						
TOTAL OPERATING INCOME					\$	\$
7. EXPENSES						
Do not include taxes, interest, depreciation, mortgage costs, capital improvements or contributions to reserves. Itemize miscellaneous operating expenses in part 10 below.						
Fuel						
Electricity						
Wages & payroll costs						
Repairs & maintenance						
Management						
Insurance						
Water & sewer						
Leasing commissions						
Miscellaneous operating expenses						
TOTAL OPERATING EXPENSES					\$	\$
Land or building rent (Term of lease _____ to _____)						
Other expenses						
TOTAL EXPENSES					\$	\$
8. ITEMIZATION OF RENTAL INCOME - For the current year.						
USE	FLOOR NUMBERS	NUMBER OF UNITS	GROSS FLOOR AREA (APPROX. SQ.FT.)	MASTER OR SPONSOR LEASE	DIRECT LEASE	TOTAL RENTAL INCOME
Residential						
Retail						
Offices						
Other						
Signage/Billboard						
Cell tower/Tel. equip						
Garage						
Laundry/Storage						
TOTALS				\$	\$	\$
9. ITEMIZATION OF OTHER NON-RENTAL OPERATING INCOME - For the current year.						
ITEM		AMOUNT		ITEM		AMOUNT
TOTAL NON-RENTAL OPERATING INCOME					\$	
10. ITEMIZATION OF MISCELLANEOUS OPERATING EXPENSES - For the current year.						
ITEM		AMOUNT		ITEM		AMOUNT
TOTAL MISCELLANEOUS OPERATING EXPENSES					\$	
11. VACANT COMMERCIAL SPACE AS OF JANUARY 5, 2020						
Specify the area and use of vacant commercial space(s):						