## **Claim of Exemption for Affiliated Party Leases**

Under MCTC Sec. 445(s)



Taxpayer Name:	
License Number:	
	mption from City of Glendale transaction privilege tax s) for the gross proceeds of rents of commercial real parties:
Lessor Name	Lessee Name
Address:	Address:
Type of Entity	Type of Entity
Do you collect rent from any other tens	ants in this building? Yes No
Basis for exemption:	
Lessor owns 80% or more of	f lessee (attach documentation. Ex. Tax Forms Sch. E, Sch. K1)
Lessee owns 80% or more of	f lessor (attach documentation. Ex. Tax Forms Sch. E, Sch. K1)
A third party owns 80% or n	more of both lessor and lessee: Name of third party:
Address:	
Ownership interest in lessor	(attach documentation):
Ownership interest in lessee	(attach documentation):
	nat the above information (including supporting wledge and belief is true, correct and complete.
Corporate Officer/Owner Signature	Date
Print Name	Phone Number & e-mail address

Return Form & Supporting Documentation To: City of Glendale – Tax & License Division 5850 W Glendale Avenue, Glendale AZ 85301 Fax: (623) 930-2186