



**State of New Jersey**  
**DIVISION OF TAXATION**  
**STATEMENT OF WAIVER OF TRANSFER TAX**  
**IMPOSED BY N.J.S.A. 54:15C-1**

**NOTE: THIS FORM MUST BE FILED WITH FORM CITT-1**

<b>PART 1 TRANSFEROR</b>			
EIN	Name of Filing Entity		
Mailing Address			
City	State	Zip	
Person to Contact	Telephone Number		
Type of Entity			

<b>PART 2 TRANSFEREE</b>			
EIN	Name of Filing Entity		
Mailing Address			
City	State	Zip	
Person to Contact	Telephone Number		

**EXEMPTIONS**

Please check the box for the exemption you are claiming.

The tax imposed by N.J.S.A. 54:15C-1 does not apply to any sale or transfer

- by or to the United States of America, this State, or any instrumentality, agency or subdivision thereof;
- to a purchaser that is an organization determined by the federal Internal Revenue Service to be exempt from federal income taxation pursuant to paragraph (3) of subsection (c) of section 501 of the federal Internal Revenue code of 1986, 26 USC s.501;
- having the underlying characteristics of the transactions enumerated in section 6 of P.L. 1968, c.49 (C.46:15-10);
- that is subject to the fee imposed tax pursuant to section 8 of P.L. 2004, c.66 (C.46:15-7.2); or
- that is incidental to a corporate merger or acquisition if the equalized assessed value of the real property transferred is less than 20% of the total value of all assets exchanged in the merger or acquisition.

By signing this statement, the transferee is declaring that it is exempt from the Controlling Interest Transfer Tax pursuant to P.L. 2006, c. 33, Section 3, (N.J.S.A. 54:15C-1).

Under penalties of perjury, I declare that I have examined this election, including all statements above, and to the best of my knowledge and belief, it is true and correct and that I am properly authorized to sign and make this consent on behalf of:

Name of Transferee	Signature and Title of Transferee	Date
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Signature of Notary	Notary stamp or seal	Date
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