



CITY AND COUNTY OF SAN FRANCISCO
OFFICE OF THE ASSESSOR-RECORDER

TRANSFER TAX AFFIDAVIT

FOR RECORDER'S USE ONLY Document Number: _____

NOTICE: ANY MATERIAL MISREPRESENTATION OF FACT IN THIS AFFIDAVIT IS A MISDEMEANOR UNDER SAN FRANCISCO BUSINESS AND TAX REGULATIONS CODE SECTION 1116. ANY PERSON WHO MAKES SUCH A MISREPRESENTATION IS SUBJECT TO PROSECUTION FOR SUCH OFFENSE.

The information provided in this affidavit shall be maintained confidential to the extent provided in Section 1118 of the San Francisco Business and Tax Regulations Code.

1. PROPERTY LOCATION - ASSESSOR'S PARCEL NUMBER (APN): Block: _____ Lot: _____
Street Address: _____

2. NAME OF GRANTEE: _____ NAME OF GRANTOR: _____

3. IS THIS A FORECLOSURE/DEED IN LIEU OF FORECLOSURE OR A TRUSTEE SALE?

Yes (Complete this section) No (Proceed to #4)

Is the Grantee the foreclosing beneficiary? Yes (Complete 3a) No (Complete 3b)

a. If yes, calculate:

Amount paid <u>in excess</u> of the amount of unpaid debt discharged (Including Costs; if less than \$0, enter \$0)	\$ _____
<i>plus</i> Unpaid debt remaining on the property assumed by grantee	\$ _____
<i>equals</i> Taxable Basis (enter amount on Line 10a)	\$ _____

b. If no, calculate:

Total amount paid at trustee sale	\$ _____
<i>plus</i> Unpaid debt remaining on the property assumed by grantee	\$ _____
<i>equals</i> Taxable Basis (enter amount on Line 10a)	\$ _____

4. IS THIS A LEASE? Yes (Complete this section) No (Proceed to #5)

a. Is the remaining term of the lease including renewal options equal to or greater than 35 years?

Yes (Complete i and ii) No (No transfer tax is due)

i. If yes, submit copy of the lease or summary of the financial terms

ii. Consideration or Value of leasehold interest: \$ _____; enter amount on line 10a

5. IS THIS A QUALIFYING RENT-RESTRICTED AFFORDABLE HOUSING TRANSFER UNDER THE COMMUNITY OPPORTUNITY TO PURCHASE ACT (COPA)? Yes No (Proceed to #6)

If yes, a certificate from the Mayor's Office of Housing and Community Development confirming the transfer qualifies under Section 41B.6 of the Administrative Code **must** be submitted

6. IS THIS AN UNRECORDED TRANSFER UNDER SECTION 1111(d) OF THE SAN FRANCISCO BUSINESS AND TAX REGULATIONS CODE? Yes (Complete this section) No (Proceed to #7)

a. If yes, date of transfer: _____

b. Fair market value of realty: \$ _____ Enter amount on line 10b

7. IS THIS A TRANSFER INVOLVING A LEGAL ENTITY/TRUST IN WHICH THE PROPORTIONAL OWNERSHIP INTEREST REMAINS THE SAME BEFORE AND AFTER THE TRANSFER?

Yes (No tax due) No (Proceed to #8)

*Note: Transfers involving legal entities in which a proportional interest exemption is claimed **must** provide copies of formation documents, such as LLC Operating Agreement, Partnership Agreement, Certificate of Shareholders, etc. in all cases other than transferring to the individual's own trust wherein the name of the trust contains that of the individual.*

8. IS THIS A GIFT, INHERITANCE, OR OTHER TRANSFER FOR NO CONSIDERATION IN WHOLE OR IN PART?

Yes (Complete this section) No (Proceed to #9)
 Gift Inheritance Add/Release co-signer Other _____

Date of Transfer/Date of Death: _____

Fair market value on date of transfer/death: \$ _____

Name of Grantor/Donor/Decedent: _____

Name of Grantee/Recipient: _____

Amount paid for any portion of transferred property: \$ _____; enter amount on Line 10a

9. DO YOU CONTEND THAT NO TRANSFER TAX IS DUE FOR A REASON NOT EXPLAINED ABOVE?

No (Proceed to #10)
 Yes - Provide a full explanation of why you contend no transfer tax is due (use additional papers if necessary).

10. TAXABLE TRANSACTIONS

Complete the following and calculate taxes below:

- a. Consideration Paid \$ _____
 (Including value of any lien or encumbrance remaining thereon at the time of transfer)
- b. Fair Market Value \$ _____
- c. Documentary Transfer Tax (Payment Due) \$ _____

TRANSFER TAX - Imposed per Article 12-C of San Francisco Business and Tax Regulations Code	
If entire consideration or value is:	Tax rate for entire consideration or value is:
More than \$100 but less than/equal to \$250,000	\$2.50 for each \$500 or portion thereof
More than \$250,000 but less than \$1,000,000	\$3.40 for each \$500 or portion thereof
\$1,000,000 or more but less than \$5,000,000	\$3.75 for each \$500 or portion thereof
\$5,000,000 or more but less than \$10,000,000	\$11.25 for each \$500 or portion thereof
\$10,000,000 or more but less than \$25,000,000	\$27.50 for each \$500 or portion thereof
\$25,000,000 or more	\$30.00 for each \$500 or portion thereof

Note: The maximum tax rate for qualified transfers under the Community Opportunity to Purchase Act is \$3.75 per \$500 or portion thereof, per §1108.6 of Article 12-C of San Francisco Business and Tax Regulations Code.

11. CONTACT INFORMATION

- a. Name of contact person: _____
- b. Telephone number: _____
- c. Mailing address: _____

I DECLARE OR AFFIRM UNDER PENALTY OF PERJURY THAT THE FOREGOING IS TRUE AND CORRECT.

 Signature of Filer

 Print Name and Title of Filer

 Place of Execution (City, County, State)

 Date of Execution