

February 8, 2017

RE: Massachusetts General Laws Chapter 59, Section 38D 38D Property Tax Return, Form O – Office

Dear Owner:

Please see the enclosed FY2018 38D Property Tax Return, Form O – **Office**. The information on this return regarding property income and expenses is requested pursuant to Massachusetts General Laws Chapter 59; Section 38D, in order that the City of Boston Assessing Department determines the actual fair cash valuation of the subject property. Please file the completed return to the Assessing Department within sixty (60) days of the mailing date. All information submitted is confidential pursuant to the law. **Please complete the return as it is and in its entirety. Alternative documents may <u>not</u> be substituted for this return.** In addition, a fillable PDF version is also available online at <u>https://www.boston.gov/departments/assessing</u>, under More Resources, Taxpayer forms.

This written request for information is made pursuant to Massachusetts General Laws Chapter 59; Section 38D. Failure to file this 38D Property Tax Return within 60 days of the mailing date may bar you from appealing the assessment to the Massachusetts Appellate Tax Board. Furthermore, your failure to comply within the 60 days of the mailing date will result in a two hundred fifty-dollar (\$250) penalty being levied. The penalty will appear on next year's tax bill. All information submitted is confidential.

You are under obligation to provide all requested information and to sign the return under the pains and penalties of perjury. If you have any questions or concerns, contact Earl Smith at (617) 635-1159. Please return the information within sixty (60) days of the mailing date to:

Sylvia Singleton Research Unit/38D Property Tax Return City of Boston Assessing Department Room 301, Boston City Hall Boston, MA 02201

It is strongly suggested returns be sent by Certified Mail, return receipt to ensure proof of delivery.

Your cooperation in completing this request in a timely manner will assist the Assessing Department in establishing fair and equitable assessments for Fiscal Year 2018.

Sincerely,

Gayle A. Willett

Gayle A. Willett Director of Valuation



Fiscal Year 2018 38D Property Tax Return Form O – Office

City of Boston Assessing Department (M. G. L. Chapter 59, Section 38D) **Return Form to:** Sylvia Singleton Research Unit/38D Property Tax Return City of Boston, Assessing Department Room 301, Boston City Hall Boston, MA 02201

The following information is requested pursuant to Massachusetts General Law Chapter 59; Section 38D, as amended, in order to determine market income and expense standards and develop fair and equitable valuations. Please submit all requested information within sixty (60) days of the mailing date.

Failure to comply within 60 days may bar you from appealing the assessment to the Massachusetts Appellate Tax Board. Furthermore, failure to comply will result in a two hundred fifty-dollar (\$250) penalty being levied. The penalty will appear on next year's tax bill. All information submitted is confidential.

A. Property and Contact Information

Complete the following.

- 1. Building Name: ______
- 2. Parcel ID Number (s): _____
- 3. Property Location:
- 4. Owner Name: _____

If trust, denote all trustees and beneficiaries:

If partnership, please list all partners (general and limited):

5. Company:			
6. Address:			
7. City:	8. State:	9. Zip Code:	
10. Email Address:			
11. Representative:		12. Phone:	

B. Affidavit

As required by Massachusetts General Laws, chapter 59, Section 38D, I hereby declare under oath that the above information and addenda are presented as being true, correct and complete to the best of my knowledge and belief are submitted under the penalties of perjury.

Signature of Owner:		Date:	mm/dd/yyyy
Print Name:			
Telephone:	Contact E-mail address:		
Signature of Preparer: :		Date:	mm/dd/yyyy
Print Name:	Title:		~ ~ ~ ~
Telephone:			

1. Recent Transaction Data

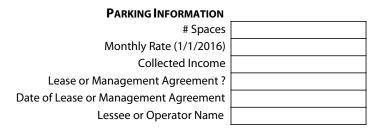
Please r	nake sure to	include Ward	l and Parcel	numbers on	all attachments

Please provide information on all transactions occurring between January 1, 2016 through the first quarter of 2017. **DO NOT SUBSTITUTE COMPLETION OF THIS SECTION BY ATTACHING A RENT ROLL.**

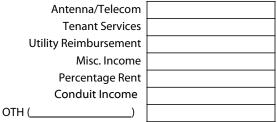
		Lease 1	Lease 2	Lease 3	Lease 4	Lease 5
Building Address						
Tenant Name						
Floor Level						
Use of Space						
Lease Execution Date	mm/dd/yyyy					
Lease Start Date	mm/dd/yyyy					
Rent Start Date	mm/dd/yyyy					
Lease Termination Date	emm/dd/yyyy					
Lease Term (Years)						
Rentable Square Feet						
Year 1 Face Rent Per SF	:					
Average Rent over Terr	n Per SF					
Free Rent Term (month	s)					
Free Rent Dollar Value						
Tenant Fitout Allowand	e					
Tenant Fitout Allowand	e Per SF					
Lease Commission Per	SF					
Lease Type						
Gross or Net Lease						
		Lease 6	Lease 7	Lease 8	Lease 9	Lease 10
Building Address		Lease 6	Lease 7	Lease 8	Lease 9	Lease 10
Tenant Name		Lease 6	Lease 7	Lease 8	Lease 9	Lease 10
Tenant Name Floor Level		Lease 6	Lease 7	Lease 8	Lease 9	Lease 10
Tenant Name Floor Level Use of Space		Lease 6	Lease 7	Lease 8	Lease 9	Lease 10
Tenant Name Floor Level Use of Space Lease Execution Date		Lease 6	Lease 7	Lease 8	Lease 9	Lease 10
Tenant Name Floor Level Use of Space Lease Execution Date Lease Start Date	mm/dd/yyyy	Lease 6	Lease 7	Lease 8	Lease 9	Lease 10
Tenant Name Floor Level Use of Space Lease Execution Date Lease Start Date Rent Start Date	mm/dd/yyyy mm/dd/yyyy	Lease 6	Lease 7	Lease 8	Lease 9	Lease 10
Tenant Name Floor Level Use of Space Lease Execution Date Lease Start Date Rent Start Date Lease Termination Date	mm/dd/yyyy mm/dd/yyyy	Lease 6	Lease 7	Lease 8	Lease 9	Lease 10
Tenant Name Floor Level Use of Space Lease Execution Date Lease Start Date Rent Start Date Lease Termination Date Lease Term (Years)	mm/dd/yyyy mm/dd/yyyy	Lease 6	Lease 7	Lease 8	Lease 9	Lease 10
Tenant Name Floor Level Use of Space Lease Execution Date Lease Start Date Rent Start Date Lease Termination Date Lease Term (Years) Rentable Square Feet	mm/dd/yyyy mm/dd/yyyy mm/dd/yyyy	Lease 6	Lease 7	Lease 8	Lease 9	Lease 10
Tenant Name Floor Level Use of Space Lease Execution Date Lease Start Date Rent Start Date Lease Termination Date Lease Term (Years) Rentable Square Feet Year 1 Face Rent Per SP	mm/dd/yyyy mm/dd/yyyy mm/dd/yyyy	Lease 6	Lease 7	Lease 8	Lease 9	Lease 10
Tenant Name Floor Level Use of Space Lease Execution Date Lease Start Date Rent Start Date Lease Termination Date Lease Term (Years) Rentable Square Feet Year 1 Face Rent Per SF Average Rent over Term	mm/dd/yyyy mm/dd/yyyy mm/dd/yyyy n MPer SF	Lease 6	Lease 7	Lease 8	Lease 9	Lease 10
Tenant Name Floor Level Use of Space Lease Execution Date Lease Start Date Rent Start Date Lease Termination Date Lease Term (Years) Rentable Square Feet Year 1 Face Rent Per SF Average Rent over Term Free Rent Term (month	mm/dd/yyyy mm/dd/yyyy mm/dd/yyyy n MPer SF	Lease 6	Lease 7	Lease 8	Lease 9	Lease 10
Tenant Name Floor Level Use of Space Lease Execution Date Lease Start Date Rent Start Date Lease Termination Date Lease Term (Years) Rentable Square Feet Year 1 Face Rent Per SF Average Rent over Term Free Rent Term (month Free Rent Dollar Value	mm/dd/yyyy mm/dd/yyyy e mm/dd/yyyy : n Per SF s)	Lease 6	Lease 7	Lease 8	Lease 9	Lease 10
Tenant Name Floor Level Use of Space Lease Execution Date Lease Start Date Rent Start Date Lease Termination Date Lease Term (Years) Rentable Square Feet Year 1 Face Rent Per SF Average Rent over Term Free Rent Term (month Free Rent Dollar Value Tenant Fitout Allowand	mm/dd/yyyy mm/dd/yyyy e mm/dd/yyyy : n Per SF (s) :e	Lease 6	Lease 7	Lease 8	Lease 9	Lease 10
Tenant Name Floor Level Use of Space Lease Execution Date Lease Start Date Rent Start Date Lease Termination Date Lease Term (Years) Rentable Square Feet Year 1 Face Rent Per SF Average Rent over Term Free Rent Term (month Free Rent Dollar Value Tenant Fitout Allowand Tenant Fitout Allowand	mm/dd/yyyy mm/dd/yyyy e mm/dd/yyyy : n Per SF s) :e :e Per SF	Lease 6	Lease 7	Lease 8	Lease 9	Lease 10
Tenant Name Floor Level Use of Space Lease Execution Date Lease Start Date Rent Start Date Lease Termination Date Lease Term (Years) Rentable Square Feet Year 1 Face Rent Per SF Average Rent over Term Free Rent Term (month Free Rent Dollar Value Tenant Fitout Allowand Lease Commission Per	mm/dd/yyyy mm/dd/yyyy e mm/dd/yyyy : n Per SF s) :e :e Per SF	Lease 6	Lease 7	Lease 8	Lease 9	Lease 10
Tenant Name Floor Level Use of Space Lease Execution Date Lease Start Date Rent Start Date Lease Termination Date Lease Term (Years) Rentable Square Feet Year 1 Face Rent Per SF Average Rent over Term Free Rent Term (month Free Rent Dollar Value Tenant Fitout Allowand Tenant Fitout Allowand	mm/dd/yyyy mm/dd/yyyy e mm/dd/yyyy : n Per SF s) :e :e Per SF	Lease 6	Lease 7	Lease 8	Lease 9	Lease 10

2. Additional Sources of Income

Please provide information for the year ending December 31, 2016.



ADDITIONAL INCOME



3. Rentable Area

Floor Level SB B	Use (RET, OFC, STG)	Total Rentable	Total Leased
В			
1			
M 2			
3			
4			
5			
6			
7			
8 9			
10			
11			
12			
13 14			
14			
16			
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26 27			
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31			
32 33			
34			
35			
36 37			
37			
<u>38</u> 39			
40			
41			
42			
43			
44 45			
45 46			
47			
48			
49			
50			
51 52			
53			
54			
55			
56			
57 58			
58			
60			
61			
62	TOTAL:		

Part A: Please provide information as of January 1, 2017

3

Part B: Please provide a rent roll as of January 1, 2017.

Part C: Please provide a stacking chart as of January 1, 2017.

4. Operating Expenses

Part A: Please provide information for the year ending December 31, 2016.

ADMINISTRATIVE	
Payroll	
Management	
Legal	
Security	
General Services	
Administrative Total	
CLEANING	
Payroll	
Contracts	
Heat/Cool (HVAC)	
Trash	
Cleaning Total	
REPAIRS & MAINTENANCE	
Payroll	
Elevators	
Heat/Cool (HVAC)	
Electrical	
Plumbing	
Supplies	
Miscellaneous	
Repairs & Maintenance Total	
UTILITIES	Separately Metered (Y/N)
Electric	
Tenant Electric	
Gas	
Oil	
Steam	
Water	
Utilities Total	
ounces rotal	
LEASING EXPENSE	
Advertising	
Commissions	
Tenant Fitout	
Leasing Expense Total	
FIXED EXPENSES	
Building Insurance	
Replacement Reserve	
Extraordinary Expenditures	
Fixed Expense Total	

Part B: Please provide a Pro Forma statement for the year ending December 31, 2016.

5. Capital Improvements or Extraordinary Expenditures

Please provide for all projects undertaken during calendar year 2016, reporting as of January 1, 2017 *Where available, please attach a five year capital plan.*

			mm/dd/yyyy	mm/dd/yyyy
Description of Item	Total Project Cost	Total Spent 1/1/2017	Project Start Date	Project End Date

6. Sales Transaction

Please describe any and all sales occurring between 1/1/2015 through the first quarter of 2017.

Sale Date	mm/dd/yyyy	_ Mortgage Amount	
Sale Price		_ Mortgage Debt Ratio	
% Interest		_ Mortgage Rate	
Title Reference (Book/page)		_ Mortgage Term	
Seller		Non Realty items included?	
Buyer		Value of Non Realty included	
<i>,</i>		- ,	

ADDITIONAL INFORMATION

7. Issues Contend Impact Value

Please describe any and all issues which you contend impact the Fair Cash Value as of January 1, 2017 in space below.

8. Miscellaneous or Additional Information

Please use the space below to include any other information you believe relevant to establishing the Fair Cash Value of the subject property as of January 1, 2017.