

East River Housing Corporation

Guaranty Supplement to Cooperative Purchase Application

Requirements for Guaranty of the Proprietary Lease

The following is a list of the documentation required by the Board of Directors of East River Housing Corporation (the "Cooperative") for a guaranty. You must submit three (3) complete sets of all papers required by the Cooperative for submission to the Board of Directors, consisting of the original plus two (2) copies of the documents listed below. All copies must be collated and presented in the exact order set forth below. The Application will not be reviewed until all the requested documents are received. There are no exceptions.

Please use additional sheets where needed.

1. Financial Information Documentation;
2. Authorization for Consumer Credit Report;
3. Guaranty of Proprietary Lease form;
4. Confirmation of tax returns;
5. Request for a copy or transcript of tax form (IRS Form 4506-T);
6. Complete copies of the Guarantor's federal and state income tax returns for the most recent three years attached to page 7 of this Guaranty Supplement.

When all the above papers are completed, call Elliot Caplan at Cooperative Village Administrative Office, 530 Grand Street, New York, NY 10002 to make an appointment to deliver them to the Office. The telephone number is (212) 677-5858, Extension 310.

East River Housing Corporation

Financial Information / Net Worth statement as of _____, 20 [insert date]

Please provide supporting documentation for each entry, e.g., three most recent monthly brokerage statements or most recent quarterly brokerage statement and three most recent monthly bank statements. Use additional sheets if necessary, attached to this page.

A. Assets:

Checking Account(s):	Name & Address of Bank	Account Number	\$ Present Value
Savings Account(s):	Name & Address of Bank	Acct. No/Type of Acct.	\$ Present Value
Stocks, Mutual Funds:	Name & Address of Bank	Acct. No/Type of Acct.	\$ Present Value
	Issuer		
Bonds:	Face Value	Issuer	\$ Present Value
Retirement Fund(s): Net Cash Value			\$
Life Insurance: (Surrender value, <u>not</u> Face Value)			\$
Real Estate Owned:	Address Property		\$ Present Market Value
	Type of Property	\$ Cost of Property	\$ Annual Gross Income from the Real Estate Listed
Automobile(s) Owned:	Make & Year of Vehicle		\$ Present Market Value
	License Plate Number & State		

East River Housing Corporation

Business Owned: _____ \$ _____
Name & Address of Business Owned Net Worth

Other Assets: Net Cash Value \$ _____

Total Assets: \$ _____

B. Liabilities: (Please provide the following for all loans and debts not paid in full at the end of the current billing cycle, including, but not limited to, credit cards, mortgages, auto loans, college loans and co-op loans):

_____ \$ _____
Creditor's Name & Address Unpaid Balance

_____ \$ _____
Account Number Months Remaining Monthly Payment

Other Liabilities: Net Cash Value \$ _____

Total Liabilities \$ _____

C. Net Worth \$ _____

Guarantor: _____
(Print or Type Name)

Date: _____

(Signature)

East River Housing Corporation

Guarantor's Consumer Credit Report Authorization

The undersigned Guarantor understands and agrees that East River Housing Corporation (the "Cooperative") intends to request Consumer Credit Reports in connection with the undersigned's guaranty in connection with an application for Apartment No. _____ located at _____, New York, NY 10002.

The undersigned Guarantor hereby authorizes the procurement of Consumer Credit Reports by the Cooperative and authorizes all credit agencies, banks, lending institutions, current and former employers and other persons and entities to release any information that they may have about the undersigned and hereby releases them from any liability and responsibility for doing so. For the sole purpose of obtaining the Report, the undersigned provides below his/her Social Security Number, Birth Date and any other name or names by which he/she has been known during the past ten years.

Guarantor: _____
(Print or Type Name)

(Social Security Number)

(Birth Date)

(Other Names in Past Ten Years)

Signature
_____, 20_____
Date

East River Housing Corporation

Guaranty of Proprietary Lease

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FOR VALUE RECEIVED, and in consideration for, and as an inducement to the East River Housing Corporation (the "Cooperative") entering into the proprietary lease for the apartment designated below (the "Lease") with the Cooperator(s) named below, the undersigned unconditionally guarantees to the Cooperative, the Cooperative's successors and assigns, the full performance and observance of all the covenants, conditions and agreements therein provided to be performed and observed by the Cooperator(s), including "Rules and Regulations" as therein provided, without requiring any notice of non-payment, non-performance, or non-observance, or proof, or notice, or demand, whereby to charge the undersigned therefor, all of which the undersigned hereby expressly waives and expressly agrees that the validity of this agreement and the obligations of the guarantor hereunder shall in no wise be terminated, affected or impaired by reason of the assertion by the Cooperative against the Cooperator(s) of any of the rights or remedies reserved to the Cooperative pursuant to the provisions of the Lease. The undersigned further covenants and agrees that this guaranty shall remain and continue in full force and effect as to any renewal, modification or extension of the lease and during any period when the Cooperator(s) may be occupying the premises as a "statutory tenant." **As a further inducement to the Cooperative to enter into the Lease and in consideration thereof, the Cooperative and the undersigned covenant and agree that in any action or proceeding brought by either the Cooperative or the undersigned against the other on any matter whatsoever arising out of, under, or by virtue of the terms of the Lease or of this guaranty that the Cooperative and the undersigned shall and does hereby WAIVE TRIAL BY JURY.**

Dated: _____, 20 ____

Name of Cooperator

Guarantor's Signature

Name of Cooperator

Guarantor's Name

Name of Cooperator

Guarantor's Residence Address

Apartment Address

Apartment Number: _____
New York, NY 10002

Guarantor's Business Address

Area Code & Telephone Number:
Home: (____) _____
Business: (____) _____
Fax: (____) _____
Cellular Phone: (____) _____
E-mail: (____) _____@_____

NOTARIZATION ON NEXT PAGE

East River Housing Corporation

Guaranty of Proprietary Lease

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ACKNOWLEDGEMENT TAKEN IN NEW YORK STATE

STATE OF NEW YORK)
) ss:
COUNTY OF _____)

On the _____ day of _____, in the year _____, before me the undersigned, a Notary Public in and for said State, personally appeared **[Insert Name]** _____, personally known to me or proved to me on the basis of satisfactory evidence to be the individual(s) whose name(s) is (are) subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their capacity(ies), and that by his/her/their signature(s) on the instrument, the individual(s), or the person(s) upon behalf of which the individual(s) acted, executed the instrument.

(Signature) _____
Notary Public

[Official Stamp/Seal]

ACKNOWLEDGEMENT TAKEN OUTSIDE OF NEW YORK STATE

STATE, DISTRICT OF COLUMBIA,)
TERRITORY, POSSESSION OR)ss:
FOREIGN COUNTRY)
_____)
_____)

On the _____ day of _____, in the year _____, before me the undersigned, a Notary Public in and for said State, personally appeared **[Insert Name]** _____, personally known to me or proved to me on the basis of satisfactory evidence to be the individual(s) whose name(s) is (are) subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their capacity(ies), and that by his/her/their signature(s) on the instrument, the individual(s), or the person(s) upon behalf of which the individual(s) acted, executed the instrument, and that such individual made such appearance before the undersigned in the _____ **[insert the city or other political subdivision and the state or country or other place where the Acknowledgement was taken]**.

(Signature) _____

(Office of individual taking Acknowledgement) _____

[Official Seal/Stamp]

Request for Transcript of Tax Return

- ▶ Do not sign this form unless all applicable lines have been completed.
- ▶ Request may be rejected if the form is incomplete or illegible.
- ▶ For more information about Form 4506-T, visit www.irs.gov/form4506t.

Tip. Use Form 4506-T to order a transcript or other return information free of charge. See the product list below. You can quickly request transcripts by using our automated self-help service tools. Please visit us at IRS.gov and click on "Get a Tax Transcript..." under "Tools" or call 1-800-908-9946. If you need a copy of your return, use **Form 4506, Request for Copy of Tax Return**. There is a fee to get a copy of your return.

1a Name shown on tax return. If a joint return, enter the name shown first.	1b First social security number on tax return, individual taxpayer identification number, or employer identification number (see instructions)
2a If a joint return, enter spouse's name shown on tax return.	2b Second social security number or individual taxpayer identification number if joint tax return
3 Current name, address (including apt., room, or suite no.), city, state, and ZIP code (see instructions)	
4 Previous address shown on the last return filed if different from line 3 (see instructions)	
5 If the transcript or tax information is to be mailed to a third party (such as a mortgage company), enter the third party's name, address, and telephone number.	

Caution: If the tax transcript is being mailed to a third party, ensure that you have filled in lines 6 through 9 before signing. Sign and date the form once you have filled in these lines. Completing these steps helps to protect your privacy. Once the IRS discloses your tax transcript to the third party listed on line 5, the IRS has no control over what the third party does with the information. If you would like to limit the third party's authority to disclose your transcript information, you can specify this limitation in your written agreement with the third party.

6 Transcript requested. Enter the tax form number here (1040, 1065, 1120, etc.) and check the appropriate box below. Enter only one tax form number per request. ▶ _____

a Return Transcript, which includes most of the line items of a tax return as filed with the IRS. A tax return transcript does not reflect changes made to the account after the return is processed. Transcripts are only available for the following returns: Form 1040 series, Form 1065, Form 1120, Form 1120-A, Form 1120-H, Form 1120-L, and Form 1120S. Return transcripts are available for the current year and returns processed during the prior 3 processing years. Most requests will be processed within 10 business days

b Account Transcript, which contains information on the financial status of the account, such as payments made on the account, penalty assessments, and adjustments made by you or the IRS after the return was filed. Return information is limited to items such as tax liability and estimated tax payments. Account transcripts are available for most returns. Most requests will be processed within 10 business days

c Record of Account, which provides the most detailed information as it is a combination of the Return Transcript and the Account Transcript. Available for current year and 3 prior tax years. Most requests will be processed within 10 business days

7 Verification of Nonfiling, which is proof from the IRS that you **did not** file a return for the year. Current year requests are only available after June 15th. There are no availability restrictions on prior year requests. Most requests will be processed within 10 business days

8 Form W-2, Form 1099 series, Form 1098 series, or Form 5498 series transcript. The IRS can provide a transcript that includes data from these information returns. State or local information is not included with the Form W-2 information. The IRS may be able to provide this transcript information for up to 10 years. Information for the current year is generally not available until the year after it is filed with the IRS. For example, W-2 information for 2011, filed in 2012, will likely not be available from the IRS until 2013. If you need W-2 information for retirement purposes, you should contact the Social Security Administration at 1-800-772-1213. Most requests will be processed within 10 business days

Caution: If you need a copy of Form W-2 or Form 1099, you should first contact the payer. To get a copy of the Form W-2 or Form 1099 filed with your return, you must use Form 4506 and request a copy of your return, which includes all attachments.

9 Year or period requested. Enter the ending date of the year or period, using the mm/dd/yyyy format. If you are requesting more than four years or periods, you must attach another Form 4506-T. For requests relating to quarterly tax returns, such as Form 941, you must enter each quarter or tax period separately.

/	/	/	/
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Caution: Do not sign this form unless all applicable lines have been completed.

Signature of taxpayer(s). I declare that I am either the taxpayer whose name is shown on line 1a or 2a, or a person authorized to obtain the tax information requested. If the request applies to a joint return, at least one spouse must sign. If signed by a corporate officer, 1 percent or more shareholder, partner, managing member, guardian, tax matters partner, executor, receiver, administrator, trustee, or party other than the taxpayer, I certify that I have the authority to execute Form 4506-T on behalf of the taxpayer. **Note:** This form must be received by IRS within 120 days of the signature date.

Signatory attests that he/she has read the attestation clause and upon so reading declares that he/she has the authority to sign the Form 4506-T. See instructions.

Signature (see instructions)	Date
Title (if line 1a above is a corporation, partnership, estate, or trust)	
Spouse's signature	Date

Phone number of taxpayer on line 1a or 2a

Section references are to the Internal Revenue Code unless otherwise noted.

Future Developments

For the latest information about Form 4506-T and its instructions, go to www.irs.gov/form4506t. Information about any recent developments affecting Form 4506-T (such as legislation enacted after we released it) will be posted on that page.

General Instructions

Caution: Do not sign this form unless all applicable lines have been completed.

Purpose of form. Use Form 4506-T to request tax return information. You can also designate (on line 5) a third party to receive the information. Taxpayers using a tax year beginning in one calendar year and ending in the following year (fiscal tax year) must file Form 4506-T to request a return transcript.

Note: If you are unsure of which type of transcript you need, request the Record of Account, as it provides the most detailed information.

Tip. Use Form 4506, Request for Copy of Tax Return, to request copies of tax returns.

Automated transcript request. You can quickly request transcripts by using our automated self-help service tools. Please visit us at IRS.gov and click on "Get a Tax Transcript..." under "Tools" or call 1-800-908-9946.

Where to file. Mail or fax Form 4506-T to the address below for the state you lived in, or the state your business was in, when that return was filed. There are two address charts: one for individual transcripts (Form 1040 series and Form W-2) and one for all other transcripts.

If you are requesting more than one transcript or other product and the chart below shows two different addresses, send your request to the address based on the address of your most recent return.

Chart for individual transcripts (Form 1040 series and Form W-2 and Form 1099)

If you filed an individual return and lived in:


Mail or fax to:

Alabama, Kentucky, Louisiana, Mississippi, Tennessee, Texas, a foreign country, American Samoa, Puerto Rico, Guam, the Commonwealth of the Northern Mariana Islands, the U.S. Virgin Islands, or A.P.O. or F.P.O. address	Internal Revenue Service RAIVS Team Stop 6716 AUSC Austin, TX 73301
Alaska, Arizona, Arkansas, California, Colorado, Hawaii, Idaho, Illinois, Indiana, Iowa, Kansas, Michigan, Minnesota, Montana, Nebraska, Nevada, New Mexico, North Dakota, Oklahoma, Oregon, South Dakota, Utah, Washington, Wisconsin, Wyoming	855-587-9604
Alabama, Arizona, Arkansas, California, Colorado, Hawaii, Idaho, Illinois, Indiana, Iowa, Kansas, Michigan, Minnesota, Montana, Nebraska, Nevada, New Mexico, North Dakota, Oklahoma, Oregon, South Dakota, Utah, Washington, Wisconsin, Wyoming	Internal Revenue Service RAIVS Team Stop 37106 Fresno, CA 93888
Alabama, Arizona, Arkansas, California, Colorado, Hawaii, Idaho, Illinois, Indiana, Iowa, Kansas, Michigan, Minnesota, Montana, Nebraska, Nevada, New Mexico, North Dakota, Oklahoma, Oregon, South Dakota, Utah, Washington, Wisconsin, Wyoming	855-800-8105
Connecticut, Delaware, District of Columbia, Florida, Georgia, Maine, Maryland, Massachusetts, Missouri, New Hampshire, New Jersey, New York, North Carolina, Ohio, Pennsylvania, Rhode Island, South Carolina, Vermont, Virginia, West Virginia	Internal Revenue Service RAIVS Team Stop 6705 P-6 Kansas City, MO 64999
Connecticut, Delaware, District of Columbia, Florida, Georgia, Maine, Maryland, Massachusetts, Missouri, New Hampshire, New Jersey, New York, North Carolina, Ohio, Pennsylvania, Rhode Island, South Carolina, Vermont, Virginia, West Virginia	855-821-0094

Chart for all other transcripts

If you lived in or your business was in:

Mail or fax to:

Alabama, Alaska, Arizona, Arkansas, California, Colorado, Florida, Hawaii, Idaho, Iowa, Kansas, Louisiana, Minnesota, Mississippi, Missouri, Montana, Nebraska, Nevada, New Mexico, North Dakota, Oklahoma, Oregon, South Dakota, Texas, Utah, Washington, Wyoming, a foreign country, American Samoa, Puerto Rico, Guam, the Commonwealth of the Northern Mariana Islands, the U.S. Virgin Islands, or A.P.O. or F.P.O. address	Internal Revenue Service RAIVS Team P.O. Box 9941 Mail Stop 6734 Ogden, UT 84409
Alabama, Alaska, Arizona, Arkansas, California, Colorado, Florida, Hawaii, Idaho, Iowa, Kansas, Louisiana, Minnesota, Mississippi, Missouri, Montana, Nebraska, Nevada, New Mexico, North Dakota, Oklahoma, Oregon, South Dakota, Texas, Utah, Washington, Wyoming, a foreign country, American Samoa, Puerto Rico, Guam, the Commonwealth of the Northern Mariana Islands, the U.S. Virgin Islands, or A.P.O. or F.P.O. address	855-298-1145
Connecticut, Delaware, District of Columbia, Georgia, Illinois, Indiana, Kentucky, Maine, Maryland, Massachusetts, Michigan, New Hampshire, New Jersey, New York, North Carolina, Ohio, Pennsylvania, Rhode Island, South Carolina, Tennessee, Vermont, Virginia, West Virginia, Wisconsin	Internal Revenue Service RAIVS Team P.O. Box 145500 Stop 2800 F Cincinnati, OH 45250
Connecticut, Delaware, District of Columbia, Georgia, Illinois, Indiana, Kentucky, Maine, Maryland, Massachusetts, Michigan, New Hampshire, New Jersey, New York, North Carolina, Ohio, Pennsylvania, Rhode Island, South Carolina, Tennessee, Vermont, Virginia, West Virginia, Wisconsin	855-800-8015
Line 1b. Enter your employer identification number (EIN) if your request relates to a business return. Otherwise, enter the first social security number (SSN) or your individual taxpayer identification number (ITIN) shown on the return. For example, if you are requesting Form 1040 that includes Schedule C (Form 1040), enter your SSN.	
Line 3. Enter your current address. If you use a P.O. box, include it on this line.	
Line 4. Enter the address shown on the last return filed if different from the address entered on line 3.	
Note: If the addresses on lines 3 and 4 are different and you have not changed your address with the IRS, file Form 8822, Change of Address. For a business address, file Form 8822-B, Change of Address or Responsible Party — Business.	
Line 6. Enter only one tax form number per request.	
Signature and date. Form 4506-T must be signed and dated by the taxpayer listed on line 1a or 2a. The IRS must receive Form 4506-T within 120 days of the date signed by the taxpayer or it will be rejected. Ensure that all applicable lines are completed before signing.	
 <p><i>You must check the box in the signature area to acknowledge you have the authority to sign and request the information. The form will not be processed and returned to you if the box is unchecked.</i></p>	
Individuals. Transcripts of jointly filed tax returns may be furnished to either spouse. Only one signature is required. Sign Form 4506-T exactly as your name appeared on the original return. If you changed your name, also sign your current name.	

Corporations. Generally, Form 4506-T can be signed by: (1) an officer having legal authority to bind the corporation, (2) any person designated by the board of directors or other governing body, or (3) any officer or employee on written request by any principal officer and attested to by the secretary or other officer. A bona fide shareholder of record owning 1 percent or more of the outstanding stock of the corporation may submit a Form 4506-T but must provide documentation to support the requester's right to receive the information.

Partnerships. Generally, Form 4506-T can be signed by any person who was a member of the partnership during any part of the tax period requested on line 9.

All others. See section 6103(e) if the taxpayer has died, is insolvent, is a dissolved corporation, or if a trustee, guardian, executor, receiver, or administrator is acting for the taxpayer.

Note: If you are Heir at law, Next of kin, or Beneficiary you must be able to establish a material interest in the estate or trust.

Documentation. For entities other than individuals, you must attach the authorization document. For example, this could be the letter from the principal officer authorizing an employee of the corporation or the letters testamentary authorizing an individual to act for an estate.

Signature by a representative. A representative can sign Form 4506-T for a taxpayer only if the taxpayer has specifically delegated this authority to the representative on Form 2848, line 5. The representative must attach Form 2848 showing the delegation to Form 4506-T.

Privacy Act and Paperwork Reduction Act Notice.

We ask for the information on this form to establish your right to gain access to the requested tax information under the Internal Revenue Code. We need this information to properly identify the tax information and respond to your request. You are not required to request any transcript; if you do request a transcript, sections 6103 and 6109 and their regulations require you to provide this information, including your SSN or EIN. If you do not provide this information, we may not be able to process your request. Providing false or fraudulent information may subject you to penalties.

Routine uses of this information include giving it to the Department of Justice for civil and criminal litigation, and cities, states, the District of Columbia, and U.S. commonwealths and possessions for use in administering their tax laws. We may also disclose this information to other countries under a tax treaty, to federal and state agencies to enforce federal nontax criminal laws, or to federal law enforcement and intelligence agencies to combat terrorism.

You are not required to provide the information requested on a form that is subject to the Paperwork Reduction Act unless the form displays a valid OMB control number. Books or records relating to a form or its instructions must be retained as long as their contents may become material in the administration of any Internal Revenue law. Generally, tax returns and return information are confidential, as required by section 6103.

The time needed to complete and file Form 4506-T will vary depending on individual circumstances. The estimated average time is: **Learning about the law or the form**, 10 min.; **Preparing the form**, 12 min.; and **Copying, assembling, and sending the form to the IRS**, 20 min.

If you have comments concerning the accuracy of these time estimates or suggestions for making Form 4506-T simpler, we would be happy to hear from you. You can write to:

Internal Revenue Service
Tax Forms and Publications Division
1111 Constitution Ave. NW, IR-6526
Washington, DC 20224

Do not send the form to this address. Instead, see *Where to file* on this page.