



Estate Tax Waiver Notice

ET-99
(8/97)

Name of bank, corporation, association, governmental entity or brokerage firm (*see Instructions*), insurance or annuity company holding asset of decedent

| | | | | | | | |
|----------------------|--------|-----------|--|------------------------|---|---------------|--|
| Decedent's last name | | First | Middle initial | Social security number | | Date of death | |
| Bonds | Stock | | Description of asset and account number(s) | Amount | Name of or payable to (<i>see Instructions</i>) | | |
| | Common | Preferred | | | | | |
| | | | | | | | |

As authorized by the Tax Law, the Commissioner of Taxation and Finance hereby waives notice of the time and place of delivery or transfer by you or your transfer agent of the above described property, and consents to the transfer without retention by you or your transfer agent of any tax and interest that may be assessed against this estate pursuant to the Tax Law.

Not valid until stamped

Note: Submit form in duplicate

You must complete all applicable areas. If an entire investment portfolio account is to be transferred, enter the name of the brokerage firm. Attach two copies of the portfolio showing the itemized assets on the date of death. If your broker requires Tax Department validation on the listing sheet that identifies the securities in the portfolio, you must request that validation when you submit the waiver notice. The department will return your validated listing sheet with the waiver notice.

Bonds — enter the quantity and denomination of bonds.

Stock — enter the number of shares of common and/or preferred stock.

Description — enter the bank account number, stock or bond description, brokerage account number (when an entire portfolio account is to be transferred) or kind of policy or annuity.

Amount — enter the date of death value of the stock or bonds, bank account, brokerage account, life insurance or annuity.

Name of or payable to — enter the name(s) on the bank accounts, stock or bonds. If they are in the name of the decedent only, enter **decedent**; otherwise, enter the name of the beneficiary or annuitant. If the beneficiary or annuitant is the estate, enter **estate of decedent**.

Need Help?

Telephone Assistance is available from 8:30 a.m. to 4:25 p.m., Monday through Friday. **For tax information**, call toll free 1 800 225-5829. **To order forms and publications**, call toll free 1 800 462-8100. **From areas outside the U.S. and Canada**, call (518) 485-6800.

Fax-on-Demand Forms Ordering System - Most forms are available by fax 24 hours a day, 7 days a week. Call toll free from the U.S. and Canada 1 800 748-3676. You must use a Touch Tone phone to order by fax. A fax code is used to identify each form.

Internet Access - <http://www.tax.state.ny.us> Access our website for forms, publications, and information.

Hotline for the Hearing and Speech Impaired - If you have access to a telecommunications device for the deaf (TDD), you can get answers to your New York State tax questions by calling toll free from the U.S. and Canada 1 800 634-2110. Assistance is available from 8:30 a.m. to 4:15 p.m., Monday through Friday. If you do not own a TDD, check with independent living centers or community action programs to find out where machines are available for public use.

Persons with Disabilities - In compliance with the Americans with Disabilities Act, we will ensure that our lobbies, offices, meeting rooms, and other facilities are accessible to persons with disabilities. If you have questions about special accommodations for persons with disabilities, please call the information numbers listed above.

Mailing Address - If you need to write, address your letter to: NYS Tax Department, Taxpayer Assistance Bureau, W A Harriman Campus, Albany, NY 12227.

Privacy Notification

The right of the Commissioner of Taxation and Finance and the Department of Taxation and Finance to collect and maintain personal information, including mandatory disclosure of social security numbers in the manner required by tax regulations, instructions and forms, is found in Articles 22, 26, 26-A, 26-B, 30, 30-A and 30-B of the Tax Law, Article 2-E of the General City Law and 42 USC 405(c)(2)(C)(i).

The Tax Department will use this information primarily to determine and administer tax liabilities due the state and city of New York and the city of Yonkers. We will also use this information for certain tax offset and exchange of tax information programs authorized by law, and for any other purpose authorized by law.

Information concerning quarterly wages paid to employees and identified by unique random identifying code numbers to preserve the privacy of the employees' names and social security numbers will be provided to certain state agencies for research purposes to evaluate the effectiveness of certain employment and training programs.

Failure to provide the required information may result in civil or criminal penalties, or both, under the Tax Law.

This information will be maintained by the Director of the Registration and Data Services Bureau, NYS Tax Department, Building 8 Room 905, W A Harriman Campus, Albany NY 12227; telephone 1 800 225-5829. From areas outside the U.S. and Canada, call (518) 485-6800.