

## BUYING BUSINESS INFORMATION SHEET

### Technology Business Tax Certificate Transfer Program

Please provide the information requested below and sign and date as requested.

#### A. **Buying Business**

Business Name: \_\_\_\_\_  
Primary Business  
Address: \_\_\_\_\_  
\_\_\_\_\_  
Contact Person and  
Title: \_\_\_\_\_  
Telephone: \_\_\_\_\_  
Email Address: \_\_\_\_\_  
Tax Identification  
Number: \_\_\_\_\_

#### B. **Selling Business**

Business Name: \_\_\_\_\_  
Primary Business  
Address: \_\_\_\_\_  
\_\_\_\_\_  
Contact Person and  
Title: \_\_\_\_\_  
Telephone: \_\_\_\_\_  
Email Address: \_\_\_\_\_  
Tax Identification  
Number: \_\_\_\_\_

#### C. **Amount of the Authorized Tax Benefit to be Sold (a separate form is needed for each Buyer)**

1. Total Authorized:	\$ _____
2. Net NOL Sold:	\$ _____
3. Gross NOL Bought:	\$ _____
4. R&D Tax Credit Sold:	\$ _____
5. Grand Total Benefit Sold:	\$ _____

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**D. Selling Price of Benefits to be Transferred (This portion must be fully completed or the form will not be processed).**

\$ \_\_\_\_\_ Gross Amount of Sale of Certificate. *This must be at least 80% of the amount of the Grand Total Benefit Sold (above).*

\$ \_\_\_\_\_ Total Expenses, Fees or Costs.

\$ \_\_\_\_\_ Net Proceeds to Seller.

\$ \_\_\_\_\_ Sale Price per Dollar.

Date \_\_\_\_\_

\_\_\_\_\_  
Signature of Authorized Selling  
Business Representative

\_\_\_\_\_  
Printed Name, Title

It is expressly agreed and understood that any information submitted to or obtained by the New Jersey Economic Development Authority (the "Authority") or the New Jersey Division of Taxation in connection with this application may be shared among the Authority and the New Jersey Division of Taxation.

The information provided in connection with the Seller's application is accurate to the best of my knowledge.

The Buying Business named in the Technology Business Tax Certificate Transfer Agreement agrees not to buy any tax benefit certificate, in connection with the Technology Business Tax Certificate Transfer Program, from an Affiliated Business.

This Information Sheet may be executed in any number of counterparts and delivered by telecopier, email, PDF or other facsimile transmission, all with the same force and effect as if the same were a fully executed and delivered original manual counterpart. Electronic signature of this Information Sheet shall be deemed to be valid execution and delivery as though an original ink. The parties explicitly consent to the electronic delivery of the terms of the transaction evidenced by this Information Sheet and affirm that their electronic signatures indicate a present intent to be bound by the electronic signatures and the terms of the Information Sheet. The electronic signature can be done either by ADOBE Acrobat or any other similar signature software that can be used for electronic signatures or by printing, manually signing, and scanning.

Date \_\_\_\_\_

\_\_\_\_\_  
Signature of Authorized Buying Business Representative

\_\_\_\_\_  
Printed Name, Title