

EXHIBIT K

VERMONT PROPERTY TRANSFER TAX RETURN

VERMONT DEPARTMENT OF TAXES
MONTPELIER, VERMONT, 05609-1401

(PLEASE TYPE OR PRINT CLEARLY)

SELLER'S (TRANSFEROR'S) NAME(S)	COMPLETE MAILING ADDRESS FOLLOWING TRANSFER	SOCIAL SECURITY NO. OR TAXPAYER IDENT NO.
Arthur Nadel	P. O. Box 871, Sarasota, FL 35230	060-26-4425
BUYER'S (TRANSFEE'S) NAME(S)	COMPLETE MAILING ADDRESS FOLLOWING TRANSFER	SOCIAL SECURITY NO. OR TAXPAYER IDENT NO.
Arthur Nadel, Trustee of the Clark/Nadel Revoc. Trust Dated 9/2/04	1618 Main Street, Sarasota, FL 34236	060-26-4425
PROPERTY LOCATION (Address in Full)	3343 U.S. Rte. 2, Marshfield, VT	DATE OF CLOSING

1. <input checked="" type="checkbox"/> FEE SIMPLE	3. <input type="checkbox"/> UNDIVIDED 1/2 INTEREST	5. <input type="checkbox"/> TIME SHARE	7. <input type="checkbox"/> EASEMENT/ROW
2. <input type="checkbox"/> LIFE ESTATE	4. <input type="checkbox"/> UNDIVIDED % INTEREST	6. <input type="checkbox"/> LEASE	8. <input type="checkbox"/> OTHER
LAND SIZE (Acres or fraction thereof) 15 ±	SPECIAL FACTORS: HAVE DEVELOPMENT RIGHTS BEEN CONVEYED x NO YES WAS SALE BETWEEN FAMILY MEMBERS x NO YES STATE RELATIONSHIP FINANCING <input type="checkbox"/> CONVENTIONAL/BANK <input type="checkbox"/> OWNER FINANCING <input checked="" type="checkbox"/> OTHER No Consideration		

BUILDINGS ON PROPERTY AT THE TIME OF TRANSFER (CHECK ALL THAT APPLY)			
1. <input type="checkbox"/> NONE	5. <input type="checkbox"/> FARM BUILDINGS	9. <input type="checkbox"/> STORE	10. <input type="checkbox"/> OTHER
2. <input type="checkbox"/> FACTORY	6. <input type="checkbox"/> MULTI FAMILY WITH DWELLING UNITS TRANSFERRED	SER NO. _____	
3. <input checked="" type="checkbox"/> SINGLE FAMILY DWELLING	7. <input type="checkbox"/> MOBILE HOME YEAR MAKE		
4. <input type="checkbox"/> CAMP/VACATION HOME	8. <input type="checkbox"/> CONDOMINIUM WITH UNITS TRANSFERRED		
CHECK WHETHER THE BUILDINGS WERE EVER <input checked="" type="checkbox"/> OCCUPIED <input type="checkbox"/> RENTED <input type="checkbox"/> WILL BE RENTED AFTER SALE			

PRIMARY USE OF PROPERTY BEFORE TRANSFER (CHECK ONE):			
1. <input checked="" type="checkbox"/> PRIMARY RESIDENCE	3. <input type="checkbox"/> CAMP/VACATION	5. <input type="checkbox"/> OPERATING FARM	7. <input type="checkbox"/> COMMERCIAL/INDUSTRIAL
2. <input type="checkbox"/> OPEN LAND	4. <input type="checkbox"/> TIMBERLAND	6. <input type="checkbox"/> GOVERNMENT USE	8. <input type="checkbox"/> OTHER

PRIMARY USE OF PROPERTY AFTER TRANSFER (CHECK ONE):			
1. <input checked="" type="checkbox"/> PRIMARY RESIDENCE	3. <input type="checkbox"/> CAMP/VACATION	5. <input type="checkbox"/> OPERATING FARM	7. <input type="checkbox"/> COMMERCIAL/INDUSTRIAL
2. <input type="checkbox"/> OPEN LAND	4. <input type="checkbox"/> TIMBERLAND	6. <input type="checkbox"/> GOVERNMENT USE	8. <input type="checkbox"/> OTHER
WAS PROPERTY PURCHASED BY TENANT x NO YES DOES BUYER HOLD TITLE TO ANY ADJOINING PROPERTY x NO YES			

CURRENT USE VALUE PROGRAM: IS ANY PORTION OF THE LAND BEING CONVEYED SUBJECT TO A LIEN OR OTHER RESTRICTIONS UNDER THE AGRICULTURAL AND MANAGED FOREST LAND USE VALUE PROGRAM CHAPTER 124 OF 32 V.S.A. ☐ YES ☒ NO

IF TRANSFER IS EXEMPT FROM PROPERTY TRANSFER TAX, CITE EXEMPTION FROM INSTRUCTIONS AND COMPLETE SECTIONS M, N, AND O BELOW.
Ex. #4

TOTAL PRICE PAID \$0.00	PRICE PAID FOR PERSONAL PROPERTY \$0.00	PRICE PAID FOR REAL PROPERTY \$0.00
STATE TYPE OF PERSONAL PROPERTY IF PRICE PAID FOR REAL PROPERTY IS LESS THAN FAIR MARKET VALUE, PLEASE DESCRIBE:		

MAKE CHECKS PAYABLE TO: VERMONT DEPARTMENT OF TAXES	\$0.00
TAX DUE: Enter amount from rate schedule on reverse side. COMPLETE RATE SCHEDULE FOR ALL TRANSFERS	

DATE SELLER ACQUIRED 9/3/04	IF A VERMONT LAND GAINS TAX RETURN IS NOT BEING FILED, CITE EXEMPTION FROM INSTRUCTIONS ON PAGE 4 OF THIS BOOKLET Ex. #2
(CONTINUED ON REVERSE SIDE)	

THIS SECTION TO BE COMPLETED BY TOWN OR CITY CLERK		TOWN NUMBER
TOWN/CITY _____	ACKNOWLEDGMENT	
DATE OF RECORD _____	RETURN RECEIVED (INCLUDING CERTIFICATES AND ACT 250 DISCLOSURE STATEMENT) AND TAX PAID.	
BOOK NUMBER _____ PAGE NO. _____	SIGNED _____ CLERK	
LISTED VALUE \$ _____ GRAND LIST YEAR OF _____	DATE _____	
PARCEL ID NO. _____		
GRAND LIST CATEGORY _____		

FORM PT-1 (8/02)

Nadel Receivership
Caccavo000018

RATE SCHEDULE

1. Tax on Special Rate Property:			
a. Value of purchaser's principal residence (not to exceed \$100,000) (See instructions).....	1.	a.\$	0.00
b. Value of property enrolled in current use program.....		b.\$	0.00
c. Value of qualified working farm.....		c.\$	0.00
d. Add Lines 1a, b and c.....		d.\$	0.00
e. Tax rate.....		e.\$	0.005
f. Tax due on Special Rate Property: Multiply Line 1d by Line 1e.....		f.\$	0.00
2. Tax on General Rate Property:			
a. Enter amount from Line O on front of return.....	2.	a.\$	0.00
b. Enter amount from Line 1d of Rate Schedule above.....		b.\$	0.00
c. Subtract Line 2b from Line 2a.....		c.\$	0.00
d. Tax Rate.....		d.\$	0.0125
e. Tax due on General Rate Property: Multiply Line 2c by Line 2d.....		e.\$	0.00
Total Tax Due		3.	\$ 0.00
Add Lines 1f and 2e and enter here and on line P on front of return.....			

LOCAL AND STATE PERMITS AND ACT 250 CERTIFICATES

Buyer(s) and Seller(s) certify as follows:

- A. That they have investigated and disclosed to every party to this transaction all of their knowledge relating to flood regulations, if any, affecting the property.
- B. That the seller(s) advised the buyer(s) that local and state building regulations, zoning regulations and subdivision regulations and wastewater system and potable water supply rules under Chapter 64 of Title 10 pertaining to the property may limit significantly the use of the property.
- C. That this transfer is in compliance with or is exempt from the wastewater system and potable water supply rules of the Agency of Natural Resources for the following reasons:
1. This property is the subject of Permit No. _____ and is in compliance with said permit, or
 2. This property and any retained parcel is exempt from the wastewater system and potable water supply rules because (see instructions for exemptions):
 - a. Parcel to be sold: Exemption Number pre-existing lot & residence
 - b. Parcel retained: Exemption Number _____

Seller(s) further certifies as follows:

- D. That this transfer of real property and any development thereon is in compliance with or exempt from 10 V.S.A. Chapter 151, Vermont's Land Use and Development law (Act 250), for the following reason:
1. This property is the subject of Act 250 Permit No. _____ and is in compliance with said permit, or
 2. This property is exempt from Act 250 because: (list exemption number from Line D in instructions) A
- E. That this transfer does/does not (strike one) result in a partition or subdivision of land. Note: If it does, an Act 250 Disclosure Statement must be attached to this return before filing with the town clerk.

WITHHOLDING CERTIFICATION

- ☐ Buyer(s) certifies that Vermont income tax has been withheld from the purchase price and will be remitted to the Commissioner of Taxes with Form RW-171 within 30 days from the transfer, OR that the transfer is exempt from income tax withholding for the following reason (check one)
- ☐ 1. Under penalties of perjury, seller(s) certifies that at the time of transfer, each seller was a resident of Vermont or an estate.
- ☐ 2. Buyer(s) certifies that the parties obtained withholding certificate no. _____ from the Commissioner of Taxes in advance of this sale.
- ☒ 3. Buyer(s) certifies that this is a transfer without consideration. (See instructions for Form RW-171).
- ☐ 4. Seller(s) is a mortgagor conveying the mortgaged property to a mortgagee in a foreclosure or transfer in lieu of foreclosure, with no additional consideration.

WE HEREBY SWEAR AND AFFIRM THAT THIS RETURN, INCLUDING ALL CERTIFICATES, IS TRUE, CORRECT AND COMPLETE TO THE BEST OF OUR KNOWLEDGE.			
SELLER(S) SIGNATURE(S)	DATE	BUYER(S) SIGNATURE(S)	DATE
AN <u>Arthur Nadel</u>	<u>9/13/04</u>	AN <u>Arthur Nadel</u>	<u>9/13/04</u>
		Arthur Nadel, Trustee of the Clark/Nadel Revocable	
		Trust Dated December 2, 2004	
Preparer's Signature _____		Prepared by _____	
Preparer's Address _____		Buyer's Representative _____ Tel. _____	

Keep a copy of this return for your records.

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