263-C-R02-0611-21000464-1 -263-C (P1) REV. 02 (06-11)	MARIN	SHELLY SCOTT ASSESSOR-RECORDER-COUNTY CLER EXEMPTIONS DIVISION			
CHURCH LESSORS' EXEMPTION CLAIM	VI Contraction	PO Box C, Civic Center Branch San Rafael, CA 94913			
PROPERTY LEASED BY A CHURCH TO A PU SCHOOL, COMMUNITY COLLEGE, STATE CO STATE UNIVERSITY, INCLUDING THE UNIVE CALIFORNIA, USED JOINTLY WITH A CHURC	OLLEGE, OR RSITY OF	PH (415) 473-3794 FAX (415) 473-6542 www.marincounty.org			
NAME AND MAILING ADDRESS (Make necessary corrections to the printed name and ma					
I	- Т				
		To receive the full exemption, this claim must			
L	L	be filed with the Assessor by February 15.			
IDENTIFICATION OF APPLICANT LESSOR'S CHURCH OR ORGANIZATION NAME					
MAILING ADDRESS					
CITY, STATE, ZIP CODE					
CORPORATE ID (IF ANY)					
IDENTIFICATION OF PROPERTY					
		FISCAL YEAR OF CLAIM			
ADDRESS OF PROPERTY (NUMBER AND STREET)		FISCAL YEAR OF CLAIM 20 20			
ADDRESS OF PROPERTY (NUMBER AND STREET) CITY, COUNTY, ZIP CODE USE OF PROPERTY Check and state the pr	rimary and incidental qualifying use perty: (if there are numerous prop property and the name and	ASSESSOR'S PARCEL NUMBER ASSESSOR'S PARCEL NUMBER es of the property. perties, please attach a list that clearly identifies the			
ADDRESS OF PROPERTY (NUMBER AND STREET) CITY, COUNTY, ZIP CODE USE OF PROPERTY Check and state the pr	perty: (if there are numerous prop	ASSESSOR'S PARCEL NUMBER ASSESSOR'S PARCEL NUMBER es of the property. perties, please attach a list that clearly identifies the			
ADDRESS OF PROPERTY (NUMBER AND STREET) CITY, COUNTY, ZIP CODE USE OF PROPERTY Check and state the pr The exemption claim is made for the following pro	perty: (if there are numerous prop property and the name and	20 20 ASSESSOR'S PARCEL NUMBER es of the property. perties, please attach a list that clearly identifies the daddress of the lessee)			
ADDRESS OF PROPERTY (NUMBER AND STREET) CITY, COUNTY, ZIP CODE USE OF PROPERTY Check and state the pr The exemption claim is made for the following pro PROPERTY TYPE	perty: (if there are numerous prop property and the name and	20 20 ASSESSOR'S PARCEL NUMBER es of the property. perties, please attach a list that clearly identifies the daddress of the lessee)			
ADDRESS OF PROPERTY (NUMBER AND STREET) CITY, COUNTY, ZIP CODE USE OF PROPERTY Check and state the pr The exemption claim is made for the following pro PROPERTY TYPE Land Buildings and Improvements Personal Property	perty: (if there are numerous prop property and the name and	20 20 ASSESSOR'S PARCEL NUMBER es of the property. perties, please attach a list that clearly identifies the daddress of the lessee)			
ADDRESS OF PROPERTY (NUMBER AND STREET) CITY, COUNTY, ZIP CODE USE OF PROPERTY Check and state the pr The exemption claim is made for the following pro PROPERTY TYPE Land Buildings and Improvements	perty: (if there are numerous prop property and the name and	20 20 ASSESSOR'S PARCEL NUMBER es of the property. perties, please attach a list that clearly identifies the daddress of the lessee)			
ADDRESS OF PROPERTY (NUMBER AND STREET) CITY, COUNTY, ZIP CODE USE OF PROPERTY Check and state the pr The exemption claim is made for the following pro PROPERTY TYPE Land Buildings and Improvements Personal Property	perty: (if there are numerous prop property and the name and	20 20 ASSESSOR'S PARCEL NUMBER es of the property. perties, please attach a list that clearly identifies the daddress of the lessee)			
ADDRESS OF PROPERTY (NUMBER AND STREET) CITY, COUNTY, ZIP CODE USE OF PROPERTY ✓ Check and state the pr The exemption claim is made for the following pro PROPERTY TYPE □ Land □ Personal Property NAME OF QUALIFYING PUBLIC SCHOOL INSTITUTION MAILING ADDRESS □ Yes □ No	perty: (if there are numerous prop property and the name and PRIMARY USE(S)	20 20 ASSESSOR'S PARCEL NUMBER es of the property. perties, please attach a list that clearly identifies the dadress of the lessee) INCIDENTAL USE CITY, STATE, ZIP CODE s, or charges from the lease does not exceed the ordinary			
ADDRESS OF PROPERTY (NUMBER AND STREET) CITY, COUNTY, ZIP CODE USE OF PROPERTY Check and state the pr The exemption claim is made for the following pro PROPERTY TYPE Land Buildings and Improvements Personal Property NAME OF QUALIFYING PUBLIC SCHOOL INSTITUTION MAILING ADDRESS Yes No The total income received by the and usual expenses in maintain	perty: (if there are numerous prop property and the name and PRIMARY USE(S) e church in the form of rents, fees ning and operating the leased pro	20 20 ASSESSOR'S PARCEL NUMBER es of the property. perties, please attach a list that clearly identifies the dadress of the lessee) INCIDENTAL USE CITY, STATE, ZIP CODE s, or charges from the lease does not exceed the ordinary			
ADDRESS OF PROPERTY (NUMBER AND STREET) CITY, COUNTY, ZIP CODE USE OF PROPERTY ✓ Check and state the pr The exemption claim is made for the following pro PROPERTY TYPE □ Land □ Buildings and Improvements □ Personal Property NAME OF QUALIFYING PUBLIC SCHOOL INSTITUTION MAILING ADDRESS □ Yes No The total income received by the and usual expenses in maintair An affidavit must be attached in I certify (or declare) under penalty of perjury under	perty: (if there are numerous prop property and the name and PRIMARY USE(S) e church in the form of rents, fees ning and operating the leased pro n which the lessee declares <u>CERTIFICATION</u> r the laws of the State of California	20 20 ASSESSOR'S PARCEL NUMBER es of the property. perties, please attach a list that clearly identifies the dadress of the lessee) INCIDENTAL USE CITY, STATE, ZIP CODE s, or charges from the lease does not exceed the ordinary operty. it uses the property for exempt purposes. that the foregoing and all information hereon, including any			
ADDRESS OF PROPERTY (NUMBER AND STREET) CITY, COUNTY, ZIP CODE USE OF PROPERTY ✓ Check and state the pr The exemption claim is made for the following pro PROPERTY TYPE □ Land □ Buildings and Improvements □ Personal Property NAME OF QUALIFYING PUBLIC SCHOOL INSTITUTION MAILING ADDRESS □ Yes No The total income received by the and usual expenses in maintair An affidavit must be attached in I certify (or declare) under penalty of perjury under	perty: (if there are numerous prop property and the name and PRIMARY USE(S) e church in the form of rents, fees ning and operating the leased pro n which the lessee declares <u>CERTIFICATION</u> r the laws of the State of California	20 20 ASSESSOR'S PARCEL NUMBER es of the property. berties, please attach a list that clearly identifies the dadress of the lessee) INCIDENTAL USE CITY, STATE, ZIP CODE s, or charges from the lease does not exceed the ordinary operty. it uses the property for exempt purposes.			
ADDRESS OF PROPERTY (NUMBER AND STREET) CITY, COUNTY, ZIP CODE USE OF PROPERTY ✓ Check and state the property The exemption claim is made for the following pro PROPERTY TYPE Land Buildings and Improvements Personal Property NAME OF QUALIFYING PUBLIC SCHOOL INSTITUTION MAILING ADDRESS Yes No The total income received by the and usual expenses in maintain An affidavit must be attached in accompanying statements of accompanying statements of accompanying statements of accompanying statements	perty: (if there are numerous prop property and the name and PRIMARY USE(S) e church in the form of rents, fees ning and operating the leased pro n which the lessee declares <u>CERTIFICATION</u> r the laws of the State of California	20 20 ASSESSOR'S PARCEL NUMBER es of the property. perties, please attach a list that clearly identifies the dadress of the lessee) INCIDENTAL USE CITY, STATE, ZIP CODE s, or charges from the lease does not exceed the ordinary operty. it uses the property for exempt purposes. that the foregoing and all information hereon, including any the best of my knowledge and belief.			
ADDRESS OF PROPERTY (NUMBER AND STREET) CITY, COUNTY, ZIP CODE USE OF PROPERTY ✓ Check and state the pr The exemption claim is made for the following pro PROPERTY TYPE Land Buildings and Improvements Personal Property NAME OF QUALIFYING PUBLIC SCHOOL INSTITUTION MAILING ADDRESS Yes No The total income received by the and usual expenses in maintain An affidavit must be attached in I certify (or declare) under penalty of perjury under accompanying statements of SIGNATURE OF PERSON MAKING CLAIM	perty: (if there are numerous prop property and the name and PRIMARY USE(S) e church in the form of rents, fees ning and operating the leased pro n which the lessee declares <u>CERTIFICATION</u> r the laws of the State of California	20 20 ASSESSOR'S PARCEL NUMBER es of the property. perties, please attach a list that clearly identifies the address of the lessee) INCIDENTAL USE INCIDENTAL USE CITY, STATE, ZIP CODE s, or charges from the lease does not exceed the ordinary operty. it uses the property for exempt purposes. that the foregoing and all information hereon, including any the best of my knowledge and belief. DATE TITLE			
ADDRESS OF PROPERTY (NUMBER AND STREET) CITY, COUNTY, ZIP CODE USE OF PROPERTY ✓ Check and state the property The exemption claim is made for the following pro PROPERTY TYPE Land Buildings and Improvements Personal Property NAME OF QUALIFYING PUBLIC SCHOOL INSTITUTION MAILING ADDRESS Yes No The total income received by the and usual expenses in maintain An affidavit must be attached in I certify (or declare) under penalty of perjury under accompanying statements of SIGNATURE OF PERSON MAKING CLAIM	perty: (if there are numerous prop property and the name and PRIMARY USE(S) e church in the form of rents, fees ning and operating the leased pro n which the lessee declares <u>CERTIFICATION</u> r the laws of the State of California	20 20 ASSESSOR'S PARCEL NUMBER es of the property. perties, please attach a list that clearly identifies the dadress of the lessee) INCIDENTAL USE INCIDENTAL USE CITY, STATE, ZIP CODE c, or charges from the lease does not exceed the ordinary operty. it uses the property for exempt purposes. that the foregoing and all information hereon, including any the best of my knowledge and belief. DATE			



INSTRUCTIONS FOR FILING CHURCH LESSORS' EXEMPTION CLAIM

IMPORTANT NOTICE

This claim may be filed to claim the welfare exemption on property leased by a church to a public school, community college, state college, state university, including the University of California when the church and public school or college both use the property in a joint manner. (See Revenue and Taxation Code section 214.6.)

Although the church has previously been granted the religious exemption, which only requires a one-time filing, annual filing of this claim form is required for a property used in conjunction with a public school to be granted the welfare exemption.

Failure to submit the public school or college lessee's affidavit will result in denial of the exemption for the lessor. Submission of the lessee's affidavit after the date the lessors' claim form is due will result in a portion of the exemption being denied. A sample affidavit is included as page 3 of this form.

IDENTIFICATION OF APPLICANT

Enter your church, corporate or organization information.

IDENTIFICATION OF PROPERTY

Enter the address of the property for which you are seeking exemption.

FISCAL YEAR

The fiscal year for which an exemption is sought must be entered correctly. The proper fiscal year follows the lien date (12:01 a.m., January 1) as of which the taxable or exempt status of the property is determined. For example, a person filing a timely claim in February 2011 would enter "2011-2012" on line four of the claim; a "2010-2011" entry on a claim filed in February 2011 would signify that a late claim was being filed for the preceding fiscal year.

USES OF PROPERTY

Check each of the types of property being claimed, and state the primary and incidental uses of the property. Primary use may include both church and school use; incidental uses would include others who use the property for meetings, receptions, etc.

Enter the name and address of the public school or college lessee. If additional space is required, or if more than one lessee is being listed, attach an itemized list.

Check the appropriate box to affirm that the total income received by the church in the form of rents, fees, or charges from the lease does not exceed the ordinary and usual expenses in maintaining and operating the leased property. The exemption is not available if the income exceeds the ordinary and usual expenses in maintaining and operating the leased property.

Attach an affidavit in which the public school or college lessee declares it uses the property for exempt purposes.

If the property, or a portion thereof, for which exemption is claimed is a student bookstore that generates unrelated business taxable income as defined in section 512 of the Internal Revenue Code, property taxes are determined by establishing a ratio of the unrelated business taxable income to the bookstore's gross income.



RETURN THIS AFFIDAVIT TO LESSOR

AFFIDAVIT FOR EXECUTION BY QUALIFYING PUBLIC SCHOOL LESSEES

NAME OF QUALIFYING	PUBLIC SCHOOL LESSEE				
MAILING ADDRESS					
CITY, STATE, ZIP CODE	<u>.</u>				
Check the type of	of qualifying use of the property				
	SCHOOL	STATE UNIVERSITY			
	UNITY COLLEGE	UNIVERSITY OF CALIFO	RNIA		
STATE NAME OF CHURCH	COLLEGE				
MAILING ADDRESS					
CITY, STATE, ZIP CODE	2				
DATE LEASE SIGNED			СС	MMENCE	EMENT DATE OF LEASE
	THE ASSESS	SOR MAY REQUEST A COPY OF THE LE	ASE AGREEMENT		
The following proper etc. Attach a separa	rty is leased as of January 1 of t te listing if necessary.	this year. If personal property is bei	ng leased, indica	te the ty	pe, make, model, serial number,
PROPERTY TYPE (REAL OR PERSONAL) PROPERTY DESCRIPTION		CRIPTION			
	h respect to lessees that are empt government entity leasing	political subdivisions of the state g the same.	e, the property is	s locate	d within the boundaries of the
		, is a student bookstore that gene	rates unrelated	busines	s taxable income as defined in
	tion 512 of the Internal Reven es, a copy of the institution's	ue Code. most recent tax return filed with	n the Internal Re	evenue	Service must accompany this
affic		mined by establishing a ratio of the			
		CERTIFICATION			
I certify (or declare)		he laws of the State of California th documents, is true and correct to th			
	AKING CLAIM			DATE	
NAME OF PERSON MAKING	G CLAIM			TITLE	
EMAIL ADDRESS				DAYTIME	TELEPHONE)
	THIS DOCUI	MENT IS SUBJECT TO PUBI		ON	

