EF-264-AH-R12-0516-40000605-1 BOE-264-AH (P1) REV. 12 (05-16)

COLLEGE EXEMPTION CLAIM

This claim is filed for fiscal year 20 ____ - 20 ____. (Example: a person filing a timely claim in January 2011 would enter "2011-2012.")



Office of Tom J. Bordonaro, Jr. San Luis Obispo County Assessor

County Government Center 1055 Monterey Street, Suite D360 San Luis Obispo, CA 93408 Telephone (805) 781-5643 Fax: (805) 781-5641

Email: Assessor@co.slo.ca.us Web Site: slocounty.ca.gov/assessor

This claim must be filed by 5:00 p.m., February 15.

| CLAIMANT NAME AND MAILING ADDRESS (Make necessary corrections to the printed name | and mailing addraga) | | | | |
|---|---|---------------------|-------------------------|-------------------|------------------|
| (Make Necessary corrections to the printed hame | e and mailing address) — | F | FOR ASSESSOR'S USE ONLY | | |
| | | Received by _ | | | |
| | | | (Assessor's | designee) | |
| | | of | (county | or city) | |
| L | _ | on | | | |
| | | | (da | ate) | |
| NAME OF CLAIMANT | | | | | |
| TITLE OF CLAIMANT | | | D | AYTIME TELEPH | ONE NUMBER |
| CORPORATE NAME OF THE COLLEGE | | | |) | |
| | | | | | |
| ADDRESS (Street, City, County, State, Zip Code) | | | | | |
| ASSESSOR'S PARCEL NUMBER OR LEGAL DESCRIPTION | | | DATE PROPERTY | WAS FIRST USE | D BY CLAIMAN |
| | | | | | |
| 1. Owner and operator: (check applicable bo Claimant is: ☐ Owner and operator | | dve | | | |
| and claims exemption on all Land | ☐ Owner only☐ Operator or☐ Buildings and improvements | _ | Personal property | , | |
| Does the above institution qualify as a col | | | | • | |
| YES NO | lege of seminary of learning under | the laws of the ota | ic or camornia: | | |
| 3. Is the institution conducted as a non-profit | t entity? | | | | |
| YES NO | | | | | |
| 4. Does the institution require for regular adr | mission the completion of a four-year | ar high school cour | se or its equivale | nt? | |
| 5. Does the institution confer upon its gradual | tes at least one academic or profess | ional degree, base | d on a course of a | t least two year | s in liberal art |
| and sciences, or on a course of at least th veterinary medicine, pharmacy, architectu | | | gy, education, me | dicine, dentistry | y, engineering |
| YES NO | | | | | |
| 6. Is the property for which the exemption is | claimed used exclusively for the p | urposes of educat | ion? | | |
| YES NO | | | | | |
| 7. List all buildings and other improvements sheet if necessary. Indicate whether lease | | | | | |
| BUILDING & IMPROVEMENTS | PRIMARY USE | INCIDEN | TAL USE | | |
| | | | | LEASE | \square OWN |
| | | | | LEASE | \square OWN |
| | | | | LEASE | \square OWN |
| | | | | LEASE | \square OWN |
| | | | | LEASE | \square OWN |
| | | | | LEASE | \square OWN |

THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION



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| 8. Has any construction commenced and/or been completed on this parcel since 12:01 a.m., January 1 YES NO If YES , please explain: | of last year? | | | | |
|--|---------------------------|--|--|--|--|
| 9. Is the property, or a portion thereof, for which an exemption is claimed a student bookstore that generates unrelated business taxable income as defined in section 512 of the Internal Revenue Code? YES NO If YES, a copy of the institution's most recent tax return filed with the Internal Revenue Service must accompany this claim. Property taxes as determined by establishing a ratio of the unrelated business taxable income to the bookstore's gross income, will be levied. | | | | | |
| 10. Has any of the property listed above been used for business purposes other than a student booksto YES NO If YES , please explain: | re? | | | | |
| 11. If any business is operated by someone other than the college, attach a copy of the lease or other a | greement. Please explain: | | | | |
| 12. Is any equipment or other property being leased or rented from someone else? YES NO | | | | | |
| If YES , list on a separate sheet the name and address of the owner and the type, make, model, property listed is not used exclusively for educational purposes at the collegiate level, please staproperty, provide the name and address of the owner. | | | | | |
| The benefit of a property tax exemption must inure to the lessee institution. If taxes paid by the lessor, see section 202.2 of the Revenue and Taxation Code. | | | | | |
| ADDITIONAL REQUIRED DOCUMENTATION | | | | | |
| Attach a separate page showing the requirements for admission. A current catalog showing the requirements may be substituted. | | | | | |
| Attach a separate page, or current catalog, listing the degrees conferred upon the graduates and the requirements for each degree. | | | | | |
| Attach a copy of the financial statements (balance sheet and operating statement for the pre | eceding fiscal year.) | | | | |
| Whom should we contact during normal business hours for additiona | l information? | | | | |
| NAME | TITLE | | | | |
| DAYTIME TELEPHONE EMAIL ADDRESS | | | | | |
| () CERTIFICATION | | | | | |
| I certify (or declare) under penalty of perjury under the laws of the State of California that the foregoing and all information hereon, including any | | | | | |
| accompanying statements or documents, is true, correct, and complete to the best of managements of the best of the best of managements of the best of the be | ту клоwleage and belief. | | | | |
| | | | | | |
| NAME OF PERSON MAKING CLAIM | DATE | | | | |

