EF-268-B-R11-0522-43000150-1

BOE-268-B (P1) REV. 11 (05-22)

FREE PUBLIC LIBRARY OR FREE MUSEUM CLAIM

PROPERTY **USED SOLELY** FOR EITHER A FREE PUBLIC LIBRARY OR FREE MUSEUM.

This claim is filed for fiscal year 20_____- - 20____.

(Example: a person filing a timely claim in January 2011 would enter "2011-2012.")

NAME AND MAILING ADDRESS

(Make necessary corrections to the printed name and mailing address)



Lawrence E. Stone Santa Clara County Assessor

Exemptions Unit West Tasman Campus 130 W Tasman Drive San Jose, CA 95134 Ph: (408) 299-6460 exemptions@asr.sccgov.org www.sccassessor.org

A claimant must complete and file this form with the Assessor by February 15.

L					
If you no longer see	ek an exemption at this location, check here Sign and return this form to the	e Assessor. Date vacated:			
NAME OF PERSON M	AKING CLAIM	TITLE			
NAME AND ADDRESS	OF OWNER OF LAND AND BUILDINGS (if different from above)				
NAME OF INSTITUTION	DN .				
MAILING ADDRESS C	F INSTITUTION (CITY, STATE, ZIP CODE)				
ADDRESS OF PROPE	RTY (NUMBER AND STREET)	ASSESSOR'S PARCEL NUMBER			
CITY, COUNTY, ZIP CO	DDE	LEASE TERMINATION DATE			
DAYS OF THE WEEK	OPEN TO THE PUBLIC AND HOURS OF OPERATION				
Check the type	of qualifying exclusive use of the property. If filing for the first time, attach a c	copy of the lease or agreement.			
LIBRARY	MUSEUM				
1. Yes No	Is admittance to the library or museum free? If no, please explain:				
2.	If a library, is there a user charge for the use of books, periodicals, or facilitie	s?			
3. Tyes No	If a museum, is there a charge for viewing the museum contents?				
	*If yes , and a BOE-267, <i>Claim for Welfare Exemption</i> , has not been filed to Office immediately. The deadline for timely filing a Claim for Welfare Exemption user charge, a <i>Claim for Welfare Exemption</i> may be allowed if both the organ the requirements for the exemption.	ion is February 15 each year. Where there is a			
4. Yes No	No Is the property, or a portion thereof, for which the exemption is claimed a bookstore that generates unrelated business taxable income as defined in section 512 of the Internal Revenue Code?				
	If yes , a copy of the institution's most recent tax return filed with the Interna Property taxes as determined by establishing a ratio of the unrelated busi income will be levied.				
5. Yes No	Is any of the owned property used for sales or business purposes other than	a bookstore? If yes, please explain:			
6. Yes No	Is any equipment or other property at this location being leased or rented from	n someone else?			
	If yes , list in the remarks section the name and address of the owner and the type, make, model, and serial number of the property. "Exclusive use" is not required for this exemption, the lessee's possession is sufficient evidence of use.				
	The benefit of a property tax exemption must inure to the lessee institution; of taxes paid by the lessor. See section 202.2 of the Revenue and Taxation C				



<u> </u>	the lesson to a	also claim the	exemption on the Lessors	Exemption Claim.
PROPERTY DESCRIPTION Land: (Legal description or map book, page and parcel number from most recent tax statement) Area: (Acres or square feet)		TION	STATE PRIMARY AND INCIDENTAL USE OF PROPERTY DESCRIBE	
		ge and parcel number	Primary use: Incidental use:	
Buildings and	mprovements			Primary use:
Bldg. No. or Name	No. of Floors	No. of Rooms	Type of Construction	
				Incidental use:
Personal Propo applicable. (Att			t and acquisition dates if sary.)	Primary use:
				Incidental use:
REMARKS				1
	Whom	should we	contact during normal	business hours for additional information?
NAME				TITLE
			IL ADDRESS	
DAYTIME TELEPHONE	<u> </u>	EMA	IIL ADDRESS	

including any accompanying statements or documents, is true, correct, and complete to the best of my knowledge and belief.

NAME OF PERSON MAKING CLAIM	TITLE
SIGNATURE OF PERSON MAKING CLAIM	DATE

