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.")



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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 address)				
	I	I	F	OR ASSESSO	R'S USE ONLY	
			Received by	(4		
				(ASSESS	or's designee)	
			of	(cou	nty or city)	
	L	ل	on			
					(date)	
NAME	OF CLAIMANT					
TITLE (DF CLAIMANT					ONE NUMBER
CORPO	DRATE NAME OF THE COLLEGE				()	
ADDRE	SS (Street, City, County, State, Zip Code)					
ASSESSOR'S PARCEL NUMBER OR LEGAL DESCRIPTION				DATE PROPERTY WAS FIRST USED BY CLAIMANT		
Clai and 2. Doe 3. Is th 4. Doe	ner and operator: <i>(check applicable bo</i> imant is: Owner and operator I claims exemption on all Land es the above institution qualify as a coll YES NO ne institution conducted as a non-profit YES NO es the institution require for regular adm YES NO es the institution confer upon its graduat	Owner only Operator on Buildings and improvements ege or seminary of learning under entity?	and/or the laws of the St ar high school cou	rse or its equiva	? Ilent?	s in liberal arts
and vete	sciences, or on a course of at least the erinary medicine, pharmacy, architectur YES NO	ree years in professional studies, s	uch as law, theolo			
6. Is th	ne property for which the exemption is	claimed used exclusively for the p	urposes of educa	tion?		
	YES NO					
7. List she	all buildings and other improvements f et if necessary. Indicate whether lease	or which exemption is claimed and do r owned.	state the primary	and incidental u	use of each. Attac	ch a separate
	LOCATIONS	PRIMARY USE	INCIDE	NTAL USE		
						OWN
						OWN
						OWN

THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION



8. Has any construction commenced and/or been completed on this parcel since 12:01 a.m., January 1 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 bookstore?						
11. If any business is operated by someone other than the college, attach a copy of the lease or other agreement. 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, and serial number of the property. If the property listed is not used exclusively for educational purposes at the collegiate level, please state the other uses of the property. If real property, 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 preceding fiscal year.) 						
Whom should we contact during normal business hours for additional 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 my knowledge and belief.

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

