EF-264-AH-R13-0522-55000056-1 BOE-264-AH (P1) REV. 13 (05-22)

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.")

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



Kaenan Whitman **Tuolumne County Assessor-Recorder**

2 South Green Street, Third Floor Sonora, CA 95370

Phone: (209) 533-5535 Fax: (209) 533-5674

Email: assessor@tuolumnecounty.ca.gov

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LEASE

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FOR ASSESSOR'S USE ONLY

	CLAIMANT NAME AND MAILING ADDRESS		FOR ASSESSOR'S USE ONLY			
	(Make necessary corrections to the printed name an	d mailing address)	Received by _			
	'		Received by	(Assessor's design	nee)	
			of			
				(county or city)		
	L		on	(date)		
	_	_		(uaic)		
fу	ou no longer seek an exemption at this locat	tion, check here 🗌 Sign and retui	n this form to the	Assessor. Date vaca	ted:	
NΑ	ME OF CLAIMANT					
ТІТ	TLE OF CLAIMANT			DAYTIM	IE TEI EPHO	ONE NUMBER
	LE OF CLAIMANT			()	AND NOMBER
CC	PRPORATE NAME OF THE COLLEGE				,	
٩D	DRESS (Street, City, County, State, Zip Code)					
AS	SSESSOR'S PARCEL NUMBER OR LEGAL DESCRIP	TION		DATE PROPERTY WAS I	FIRST USED	BY CLAIMANT
1	Owner and operator: (check applicable boxe	e)		1		
		☐ Owner only ☐ Operator only				
	_	☐ Buildings and improvements		Personal property		
	Does the above institution qualify as a colleg	-	_			
۷.	YES NO	ge of Seminary of learning under the	e laws of the Sta	te of California :		
_						
3.	Is the institution conducted as a non-profit er	ntity?				
4.	Does the institution require for regular admis	sion the completion of a four-year	high school cour	se or its equivalent?		
	YES NO					
	Does the institution confer upon its graduates					
	and sciences, or on a course of at least three veterinary medicine, pharmacy, architecture,			y, education, medicine	e, dentistry	, engineering
	YES NO	inic arts, commerce, or journalish				
_				0		
o.	Is the property for which the exemption is cla	aimed used exclusively for the pul	poses of educati	on?		
	YES NO					
	List all buildings and other improvements for					
	sheet if necessary. Indicate whether leased	or owned. Please use a separat e	claim form for	each Assessor's Par	cel Numb	er.
	BUILDING & IMPROVEMENTS	PRIMARY USE	INCIDEN	TAL USE		
					LEASE	\square OWN
				П	LEASE	OWN
					LEASE	_ ☐ OWN
					LEASE	

THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION



	R13-0522-55000056-2 H (P2) REV. 13 (05-22)
	ey construction commenced and/or been completed on this parcel since 12:01 a.m., January 1 of last year? ES NO If YES , please explain:
as de	property, or a portion thereof, for which an exemption is claimed a student bookstore that generates unrelated business taxable income ned in section 512 of the Internal Revenue Code? ES NO S, a copy of the institution's most recent tax return filed with the Internal Revenue Service must accompany this claim. Property taxes etermined by establishing a ratio of the unrelated business taxable income to the bookstore's gross income, will be levied.
	any of the property listed above been used for business purposes other than a student bookstore? ES NO If YES , please explain:
11. If an	business is operated by someone other than the college, attach a copy of the lease or other agreement. Please explain:
If Y pro pro	equipment or other property being leased or rented from someone else? Solution is separate sheet the name and address of the owner and the type, make, model, and serial number of the property. If the entry listed is not used exclusively for educational purposes at the collegiate level, please state the other uses of the property. If real entry, provide the name and address of the owner. Deenefit 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 tion 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 (ELEPHONE EMAIL ADDRESS
1	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
SIGNATUR	accompanying statements or documents, is true, correct, and complete to the best of my knowledge and belief. OF PERSON MAKING CLAIM TITLE
	·

DATE



NAME OF PERSON MAKING CLAIM