-263-C-R02-0611-04000220-1 E-263-C (P1) REV. 02 (06-11)		Diane Brown Butte County Assessor 25 County Center Dr Suite 100		
CHURCH LESSORS' EXEMPTION CLAIN PROPERTY LEASED BY A CHURCH TO A PUL SCHOOL, COMMUNITY COLLEGE, STATE CO STATE UNIVERSITY, INCLUDING THE UNIVE CALIFORNIA, USED JOINTLY WITH A CHURC	BLIC DLLEGE, OR RSITY OF	Oroville, CA 95965-3382 (530)552-3800 Email: assessorsoffice@buttecounty.net Website: www.buttecounty.net/assessor		
NAME AND MAILING ADDRESS (Make necessary corrections to the printed name and mai	iling address)			
L		To receive the full exemption, this clain be filed with the Assessor by February		
IDENTIFICATION OF APPLICANT LESSOR'S CHURCH OR ORGANIZATION NAME				
LESSOR S CHURCH OR ORGANIZATION NAME				
MAILING ADDRESS				
CITY, STATE, ZIP CODE				
CORPORATE ID (IF ANY)				
IDENTIFICATION OF PROPERTY				
ADDRESS OF PROPERTY (NUMBER AND STREET)		FISCAL YEAR 0 20 = 2		
CITY, COUNTY, ZIP CODE		ASSESSOR'S PARCEL NUMBER		
USE OF PROPERTY Check and state the pr The exemption claim is made for the following prop	rimary and incidental qualifying uses of the perty: (if there are numerous properties, property and the name and addre	please attach a list that clearly identifies the		
PROPERTY TYPE	PRIMARY USE(S)	INCIDENTAL USE		
Land				
Buildings and Improvements				
Personal Property				
NAME OF QUALIFYING PUBLIC SCHOOL INSTITUTION				
MAILING ADDRESS	CITY, STATE, ZIP CODE			
Yes No The total income received by the and usual expenses in maintain	e church in the form of rents, fees, or ch ing and operating the leased property.	arges from the lease does not exceed the o	ordinary	
An affidavit must be attached ir	n which the lessee declares it use	es the property for exempt purposes	S	
	CERTIFICATION			
I certify (or declare) under penalty of perjury under accompanying statements o	r the laws of the State of California that th r documents, is true and correct to the be		ling any	
SIGNATURE OF PERSON MAKING CLAIM		DATE		
NAME OF PERSON MAKING CLAIM		TITLE		

THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION

DAYTIME TELEPHONE

)

(



EMAIL ADDRESS

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 QUALIF	YING PU	BLIC SCHOOL LESSEE					
MAILING ADDRES	S						
CITY, STATE, ZIP C	CODE						
Check the ty	/pe of q	ualifying use of the property					
PUBLIC SCHOOL STATE UNIVERSITY							
COMMUNITY COLLEGE UNIVERSITY OF CALIFORNIA							
STA	ATE CC	LLEGE					
NAME OF CHURCI	H						
MAILING ADDRES	S						
CITY, STATE, ZIP C	CODE						
DATE LEASE SIGNED				COMMENC	COMMENCEMENT DATE OF LEASE		
		THE ASSESSOR	 MAY REQUEST A COPY OF THE LEASE AGREEME!	NT			
		is leased as of January 1 of this isting if necessary.	year. If personal property is being leased, ind	icate the ty	ype, make, model, serial number,		
PROPERTY TYPE (REAL OR PERSONAL)			PROPERTY DESCRIPTION				
🗌 Yes 🗌 No		espect to lessees that are pol ot government entity leasing the	itical subdivisions of the state, the propert	y is locate	ed within the boundaries of the		
🗌 Yes 🗌 No		• • •	a student bookstore that generates unrelate	ed busine:	ss taxable income as defined in		
	sectio	n 512 of the Internal Revenue	Code.				
			ost recent tax return filed with the Internal ed by establishing a ratio of the unrelated bu				
		income.	, , , , , , , , , , , , , , , , , , ,				
			CERTIFICATION				
I certify (or decla			aws of the State of California that the foregoir uments, is true and correct to the best of my k				
SIGNATURE OF PERS	SON MAK	NG CLAIM		DATE			
NAME OF PERSON MAKING CLAIM		TITLE					
EMAIL ADDRESS				DAYTIM	TELEPHONE		
				()		
		THIS DOCUME	NT IS SUBJECT TO PUBLIC INSPEC	TION			

