BOE-267-A (P1) REV. 23 (05-22)

#### 20 **CLAIM FOR WELFARE EXEMPTION (ANNUAL FILING)**



**Alyssa Douglass Butte County Assessor** 

25 County Center Dr Suite 100 Oroville, CA 95965-3382 (530)552-3800 ~ .

To re file th	ceive nis forr	the n w	full exemption, a claimant must complete and tith the Assessor by February 15. me and Mailing Address: (Make necessary corrections in							
			name and address.)	Property Location:						
				This organization owns rents/leases the real property at this location:						
				Property No.: Class:						
recei	ving ti	he e	organization received the Welfare Exemption for all or part of the exemption for the property you own at this location, you <b>must</b> cor red for each location. The Assessor may contact you for additior	property your organization owns at the location listed above. To continue nplete, sign and return this claim form to the Assessor. <b>A separate claim</b> nal information.						
A. If you no longer seek an exemption at this location, check here , sign and return this form to the Assessor. Date Vacated:										
B. If	your o	orga	nization is dissolved and therefore no longer needs an Organizati	onal Clearance Certificate, check here 🗌						
C. C	heck,	if ch	nanged within the last year: 🖳 Mailing Address 🦳 Org	anization Name						
D. D	oes yo	our o	organization have a valid Organizational Clearance Certificate (O							
E. Ha last y Box s docu <i>Read</i> attac	ave yo vear? 94287 ments <i>I the ir</i>	ou a 9, S we <i>nfori</i>	mended the organization's formative documents (i.e., articles of i Yes No If <b>yes</b> , please mail a copy of the amendment to the Bacramento, CA 94279-0064. Please include your OCC number. I re amended, please forward a copy of this page to the Board of E	ncorporation, constitution, trust instrument, articles of organization) since e State Board of Equalization, County-Assessed Properties Division, P.O. Note to Assessor's Office: If the organization is dissolved or the formative equalization. St be answered. If the answer to any question is "YES," explain in an						
Real property (land/buildings/improvements) Personal property Taxable Possessory Interest										
YES	NO		Since January 1, last year:							
		1.	Have any of the activities or use on any portion of the property th of the change in activities or use.	at received an exemption last year changed? If yes, attach an explanation						
			Is any portion of this property being used for exempt purposes the	<b>o</b>						
			Is any portion of this property vacant or unused? If <b>yes</b> , since (d							
			formal rehabilitation program may be exempt if BOE-267-R is file							
		5.	Is any portion of the property used for living quarters? If yes, che	ck one:						
			Transitional / emergency shelter							
			Low-income housing (check one)							
			Owned by a non-profit organization or eligible limited lia	ability company, <u>submit BOE-267-L</u>						
			Owned by a limited partnership, <u>submit BOE-267-L1</u>	an early ar earliese are provided or the preparity is financed by the federal						
			government under, but not limited to, sections 202, 231, 23							
			Living quarters associated with a rehabilitation program, su							
			with a statement indicating that housing continues to be use	nentation including the occupant's position or role in the organization, ad for the organization's exempt purpose. (See "Housing" on reverse.)						
		6.	Do other persons or organizations use any of this property? If <b>ye</b> a list describing what is used, the name of the user, the amour previously provided to the Assessor.	<b>s</b> , <u>submit BOE-267-0</u> if real property is used; for personal property attach it received by claimant (if any) and a copy of the lease agreement if not						
		7.	Did this or any portion of this property generate taxable "unrela Revenue Code? If <b>yes</b> , see "Unrelated Business Taxable Incom	ated business taxable income," as defined in section 512 of the Internal e" on the reverse.						
		8.	Have the organization's income and/or expenses increased by recent and the prior year's complete financial statements along v	more than 25 percent since last year? If <b>yes,</b> attach a copy of your most vith an explanation of increase.						
		9.	Is there any equipment or property at this location that is leased	or rented to the claimant? If <b>yes</b> , provide the owner's name and address						

and a description of the property. This property may be taxable as it is not owned by the claimant. NAME OF PERSON TO CONTACT FOR ADDITIONAL INFORMATION (please print) DAYTIME TELEPHONE 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 CLAIMANT TITLE DATE ► EMAIL ADDRESS ASSESSOR'S USE ONLY PART Denied Approved: Reason(s) for Denial: THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION



# BOE-267-A (P2) REV. 23 (05-22)

### **GENERAL INFORMATION**

The Welfare Exemption is available only to property, real or personal, **owned** by a religious, charitable, hospital, or scientific organization and **used exclusively** for religious, charitable, hospital, or scientific purposes. It is also available on a taxable possessory interest in publically owned real property used for exempt purposes by an organization that qualifies for the welfare exemption. A public owner is a local, state or federal agency.

To be eligible for the full exemption, the claimant **must** file a claim each year on or before February 15. Only 90 percent of any tax, penalty, or interest may be canceled or refunded when a claim is filed between February 16 and December 31 of the current year. If the application is filed on or after January 1 of the next year, only 85 percent of any tax, penalty, or interest may be canceled or refunded. The tax, penalty, and interest for a given year may not exceed \$250. A separate claim must be completed and filed for each property for which exemption is sought.

In accordance with Revenue and Taxation Code section 254.5(b)(2), the assessor may institute an audit or verification of the property's use to determine whether both the owner and user of the property meet the requirements of Revenue and Taxation Code section 214.

## **ORGANIZATIONAL CLEARANCE CERTIFICATE**

The Assessor may not approve a property tax exemption claim until the claimant has been issued a valid *Organizational Clearance Certificate* (OCC) by the State Board of Equalization. If you are seeking exemption on this property, you must provide the organization's OCC No. and date issued. A listing of organizations with valid OCCs is available on the Board's website (*www.boe.ca.gov*) and can be accessed at *www.boe.ca.gov/proptaxes/welfareorgeligible.htm*. You may also contact the Board at 1-916-274-3430.

## HOUSING

If question 5, box "**Other**" is checked, describe the portion of the property used for living quarters (since January 1 of the prior year). Submit (1) documentation, including tenets, canons, or written policy, that indicates the organization requires housing be provided to employees and/or volunteers, or (2) include statement why such housing is incidental to and reasonably necessary for the exempt purpose of the organization. If the documentation described in items (1) or (2) has been submitted in a previous year for this location, please submit documentation including the occupant's position or role in the organization with a statement indicating that the housing continues to be used for organization's exempt purpose.

## USE OF THE PROPERTY BY OTHER ORGANIZATIONS

If question 6 is answered **yes**, and your organization's real property is used by another party submit BOE-267-O. If another party only uses your personal property, then submit an attachment providing the requested information for such personal property and confirm that no real property is used by other parties. The lease does not need to be provided if furnished in a prior year.

## UNRELATED BUSINESS TAXABLE INCOME

If question 7 is answered yes, you must attach the following to the claim:

- the organization's information and tax returns, including Form 990-T, filed with the Internal Revenue Service for its immediately preceding year;
- a statement setting forth the amount of time devoted to the organization's income-producing and to its non income-producing activities and, where applicable, a description of that portion of the property on which those activities are conducted;
- · a statement listing the specific activities and locations which produce unrelated business taxable income; and
- a statement setting forth the amount of income of the organization that is attributable to activities in this state and is exempt from income or franchise taxation and the amount of total income of the organization that is attributable to activities in this state.

		ASSESSOR'S US	SE ONLY					
	1	ASSESSED VA	LUES					
ITEM	TOTA	LASSESSED VALUE OF:						
	LAND	IMPROVEMENTS	PERSONAL PROPERTY	FIXTURES	TOTAL			
ITEM	EXEN	IPTION ALLOWED						
	LAND	IMPROVEMENTS	PERSONAL PROPERTY	FIXTURES	TOTAL			
If another exemption, such as	the church, religious, e	tc., was allowed this year o	n a portion of the property des	, cribed in the claim, indi	cate the type and			
amount of the exemption:	(type)	φ(amount)						
		B	۷					
			(Assessor or designee)		(date)			