EF-263-R12-0617-07000392-1 BOE-263 (P1) REV. 12 (06-17)

LESSORS' EXEMPTION CLAIM

PROPERTY USED FOR FREE PUBLIC LIBRARIES AND FREE MUSEUMS, AND PROPERTY USED EXCLUSIVELY FOR PUBLIC SCHOOLS, COMMUNITY COLLEGES, STATE COLLEGES, STATE UNIVERSITIES, UNIVERSITY OF CALIFORNIA, CHURCHES, AND NONPROFIT COLLEGES

> NAME AND MAILING ADDRESS (Make necessary corrections to the printed name and mailing address)



Gus Kramer County Assessor

2530 Arnold Drive, Suite 100 Martinez, CA 94553-4359 FAX: (925) 313-7488 Telephone: (925) 313-7400 http://www.cccounty.us/assessor

	by February 15.				
DENTIFICATION OF ADDITIONAL					
IDENTIFICATION OF APPLICANT LESSOR'S CORPORATE OR ORGANIZATION NAME					
MAILING ADDRESS					
CITY, STATE, ZIP CODE					
CORPORATE ID (IF ANY)					
IDENTIFICATION OF PROPERTY					
ADDRESS OF PROPERTY (NUMBER AND STREET)			FISCAL YEAR OF CLAIM 20 - 20		
CITY, COUNTY, ZIP CODE		ASSESSOR'S PARC			
	primary and incidental qualifying uses of the property: (if there are numerous properties, please property and the name and address of the	e attach a list that clearl	y identifies the		
PROPERTY TYPE	PRIMARY USE	INCIDENT	INCIDENTAL USE		
Land					
☐ Buildings and Improvements					
Personal Property NAME OF QUALIFYING LESSEE INSTITUTION					
MAILING ADDRESS	C	ITY, STATE, ZIP CODE			
and free museums, the statute	see the exclusive right to possession and use of the does not require "exclusive" use.		•		
	'es No Property in this claim for exemption will be reported by the lessor on a business property statement submitted to the Assessor. (See instructions for property statement filing requirements.)				
Yes No An affidavit is attached in which the lessee declares it exclusively uses the property for exempt purposes. If No , the affidavit will be submitted by the lessor with the property statement.					
	CERTIFICATION				
	der the laws of the State of California that the foreg s or documents, is true and correct to the best of m				
SIGNATURE OF PERSON MAKING CLAIM	DATE	DATE			
NAME OF PERSON MAKING CLAIM		TITLE			
EMAIL ADDRESS		DAYTIME TELEPHONE	<u> </u>		

THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION



INSTRUCTIONS FOR FILING LESSORS' EXEMPTION CLAIM

IMPORTANT NOTICE

A qualifying institution is one whose property is **used for** free public libraries and free museums, and for property **used exclusively for** public schools, community colleges, state colleges, state universities, University of California, churches, and nonprofit colleges.

Failure to submit the lessee's affidavit will result in denial of the exemption for the lessor. Submission of the lessee's affidavit after the date the claim form is due (for taxpayers not required to file a property statement) or after the last day for filing the lessor's property statement without penalty under section 463 of the Revenue and Taxation Code (for taxpayers required to file a property statement) will result in a portion of the exemption being denied. A Lessee's Affidavit is not required for free public library or free museum exemption.

A sample affidavit is included as page 3 of this form.

IDENTIFICATION OF APPLICANT

Enter your company or organization information.

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 2017 would enter "2017-2018" on line five of the claim; a "2016-2017" entry on a claim filed in February 2017 would signify that a late claim was being filed for the preceding fiscal year. The lease must be in effect and the property in use on lien date of the fiscal year for which the exemption is sought. Lessors' Exemptions cannot be prorated based on the commencement date of the lease.

USES OF PROPERTY

Check each of the types of property being claimed, and state the primary and incidental uses of the property.

Enter the name and address of the lessee. If additional space is required, or if more than one lessee is being listed, attach an itemized list.

Confirm, by checking the appropriate box, that the lease confers upon the lessee the **exclusive** right to possession and use of the property, except for free public libraries and free museums.

Check the appropriate box regarding property statement reporting. If you own taxable personal property in any county whose aggregate cost is \$100,000 or more for any assessment year, you must file a property statement with the Assessor of that county whether or not specifically requested to do so. Any person not otherwise required to file a statement shall do so upon request of the Assessor, regardless of aggregate cost.

Check the appropriate box to indicate whether the affidavit is attached or will be submitted with the property statement.

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.

PROPERTY TAX BENEFITS

Property tax benefits claimed herein must be passed on to the lessee in the form of:

- (1) Reduction in rental payments (sections 202.2 and 206.2, Revenue and Taxation Code).
- (2) Refund of rental payments, if paid (sections 202.2 and 206.2, Revenue and Taxation Code).
- (3) Claim by lessee under the provisions of section 5096, Revenue and Taxation Code, for a refund of taxes paid by a lessor (section 202.2, Revenue and Taxation Code).

Note: Where the lessee files a claim for an exemption and reports leased property, such property will be allowed the exemption if used in an exempt manner.



EF-263-R12-0617-0700039

RETURN THIS AFFIDAVIT TO LESSOR

AFFIDAVIT FOR EXECUTION BY QUALIFYING INSTITUTIONAL LESSEES

MAILING ADDRESS CITY, STATE_ZIP CODE Check the type of qualifying exclusive use of the property PUBLIC SCHOOL STATE UNIVERSITY NONPROFIT COLLEGE UNIVERSITY OF CALIFORNIA STATE COLLEGE UNIVERSITY OF CALIFORNIA STATE COLLEGE CHURCH STATE_COLLEGE CHURCH STATE_COLLEGE CHURCH NAME OF LISSOR STATE_COLLEGE CHURCH MAILING ADDRESS CITY, STATE_ZIP CODE	NAME OF QUALIFYI	NG LESSEE INSTITUTION				
Check the type of qualifying exclusive use of the property PUBLIC SCHOOL STATE UNIVERSITY NONPROFIT COLLEGE STATE COLLEGE UNIVERSITY OF CALIFORNIA STATE COLLEGE CHURCH NAME OF LESSOR	MAILING ADDRESS					
PUBLIC SCHOOL STATE UNIVERSITY NONPROFIT COLLEGE COMMUNITY COLLEGE UNIVERSITY OF CALIFORNIA STATE COLLEGE CHURCH	CITY, STATE, ZIP CO	DDE				
STATE COLLEGE	Check the typ	e of qualifying exclusive us	se of the property			
STATE COLLEGE	☐ PUBLIC SCHOOL		☐ STATE UNIVERSITY	☐ NONPROFIT COLLEGE		
NAME OF LESSOR MALING ADDRESS CITY, STATE, ZIP CODE COMMENCEMENT DATE OF LEASE DATE PROPERTY PUT TO EXEMPT USE PLEASE ATTACH A COPY OF THE LEASE AGREEMENT The following property is leased as of January 1 of this year. If personal property is being leased, indicate the type, make, model, serial number etc. Attach a separate listing if necessary. PROPERTY TYPE (REAL OR PERSONAL) PROPERTY DESCRIPTION PROPERTY DESCRIPTION PROPERTY DESCRIPTION The property, or a portion thereof so used is not eligible for exemption. The property or a portion thereof, is a student 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 Internal Revenue Service must accompany this affidavit. Property taxes are determined by establishing a ratio of the unrelated business taxable income to the bookstore's gross income. CERTIFICATION I understand that the lessor has filed for a property tax exemption on the above property leased to this institution, and that any benefit from the exemption must go to this institution by way of a reduction in retail payments or a return din an amount equal to the reduction in taxes. I certify (or declare) under penalty of perjuny under the laws of the State of California that the foregoing and all information hereon, including any accompanying statements or documents, is true and correct to the best of my knowledge and belief. SIGNATURE OF PERSON MAKING CLAIM ITTLE	☐ COMMUNITY COLLEGE		UNIVERSITY OF CALIFORN	UNIVERSITY OF CALIFORNIA		
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