## **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.")



Kristine Lee Kings County Assessor 1400 W. Lacey Blvd. Hanford, CA 93230 559-852-2486 Fax: 559-582-2794

LEASE

LEASE

LEASE

OWN

OWN

OWN

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

CLAIMANT NAME AND MAILING ADDRESS (Make necessary corrections to the printed name		e and mailing address)					
			Г	FOR ASSESSOR'S USE ONLY			
				Received by _	(4		
					(Asse	ssor's designee)	
				of	(C	ounty or city)	
	L			on		(date)	
	F CLAIMANT						
NAME O							
TITLE O	F CLAIMANT					DAYTIME TELEPH	ONE NUMBER
CORPO	RATE NAME OF THE COLLEGE						
ADDRES	SS (Street, City, County, State, Zip Code)						
ASSESSOR'S PARCEL NUMBER OR LEGAL DESCRIPTION					DATE PROPERTY WAS FIRST USED BY CLAIMANT		
Clair	er and operator: <i>(check applicable bc</i> nant is: Owner and operator claims exemption on all Land				Personal pror	perty	
2. Does	s the above institution qualify as a col	<b>U</b> .					
	/ES NO						
	e institution conducted as a non-profit /ES	t entity?					
	the institution require for regular adr YES NO	mission the completion of	of a four-year	high school cour	se or its equi	valent?	
and s	the institution confer upon its graduat sciences, or on a course of at least th inary medicine, pharmacy, architectu /ES  NO	ree years in professiona	I studies, suc	h as law, theolog			
6. Is the	e property for which the exemption is	claimed used exclusive	ely for the pur	poses of educati	on?		
١	YES NO						
	all buildings and other improvements if necessary. Indicate whether lease						
E	BUILDING & IMPROVEMENTS	PRIMARY US	E	INCIDEN	TAL USE		
							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? YES NO If <b>YES</b> , please explain:						
<ul> <li>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?</li> <li>YES NO</li> <li>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.</li> </ul>						
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:						
<ul> <li>12. Is any equipment or other property being leased or rented from someone else?</li> <li>YES NO</li> <li>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.</li> </ul>						
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						
<ul> <li>Attach a separate page showing the requirements for admission. A current catalog showing the requirements may be substituted.</li> </ul>						
<ul> <li>Attach a separate page, or current catalog, listing the degrees conferred upon the graduates and the requirements for each degree.</li> </ul>						
• 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 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

