F-264-AH-R13-0522-16000056-1 BOE-264-AH (P1) REV. 13 (05-22) COLLEGE EXEMPTION CLAIM This claim is filed for fiscal year 20 2 (Example: a person filing a t imely claim in J an would enter "2011-2012.")			14 H	Tristine Lee (ings Count) 400 W. Lacey B anford, CA 932: 59-852-2486 ax: 559-582-279	lvd. 30	
This claim must be filed by 5:00 p.m., Febr	ruary 15.		E			,
CLAIMANT NAME AND MAILING ADDRESS (Make necessary corrections to the printed name a	and mailing address)		FOR ASSESSOR'S USE ONLY			
F i	<u> </u>	Γ	Received by			
			of			
				(сол	unty or city)	
L			on		(date)	
If you no longer seek an exemption at this loc	ation, check here 🗌 Sig	gn and retur	n this form to the	e Assessor. Da	ate vacated:	
TITLE OF CLAIMANT						ONE NUMBER
CORPORATE NAME OF THE COLLEGE						
ADDRESS (Street, City, County, State, Zip Code)						
 Owner and operator: (check applicable box Claimant is: Owner and operator and claims exemption on all Land Does the above institution qualify as a colle YES NO 	Owner only Op Buildings and impro	vements		Personal propette of California	-	
3. Is the institution conducted as a non-profit	entity?					
4. Does the institution require for regular adm	ission the completion of	a four-year	high school cour	se or its equiva	alent?	
 5. Does the institution confer upon its graduate and sciences, or on a course of at least three veterinary medicine, pharmacy, architecture YES NO 6. Is the property for which the exemption is constrained on YES NO 7. List all buildings and other improvements for 	ee years in professional s e, fine arts, commerce, o claimed used exclusively	studies, suc r journalism / for the pur	h as law, theolog? ? poses of educati	gy, education, r	nedicine, dentistr <u>y</u>	y, engineering,
sheet if necessary. Indicate whether leased						
BUILDING & IMPROVEMENTS	PRIMARY USE		INCIDEN	TAL USE		
						OWN

THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION

□ LEASE □ OWN □ LEASE □ OWN

OWN

LEASE



EF-264-AH-R13-0522-16000056-2 BOE-264-AH (P2) REV. 13 (05-22)
8. Has any construction commenced and/or been completed on this parcel since 12:01 a.m., January 1 of last year?
 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? YES NO
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.
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:
12. Is any equipment or other property being leased or rented from someone else?
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.
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

- 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 TELEPHONE	EMAIL ADDRESS					
()						
CERTIFICATION						
	rjury under the laws of the State of California that the foregoing a nts or documents, is true, correct, and complete to the best of m					
SIGNATURE OF PERSON MAKING CLAIM		TITLE				
NAME OF PERSON MAKING CLAIM		DATE				

