

#### Joaquín Torres Assessor-Recorder Office of the Assessor-Recorder 1 Dr. Carlton B. Goodlett Place - Room 190 San Francisco, CA 94102 www.sfassessor.org (415) 554-5596

PROPERTY LEASED BY A CHURCH TO A PUBLIC SCHOOL, COMMUNITY COLLEGE, STATE COLLEGE, OR STATE UNIVERSITY, INCLUDING THE UNIVERSITY OF CALIFORNIA, USED JOINTLY WITH A CHURCH

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

**CHURCH LESSORS' EXEMPTION CLAIM** 

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To receive the full exemption, this claim must be filed with the Assessor by February 15.

#### **IDENTIFICATION OF APPLICANT**

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 OF CLAIM
	20 20
CITY, COUNTY, ZIP CODE	ASSESSOR'S PARCEL NUMBER

### **USE OF PROPERTY** Check and state the primary and incidental qualifying uses of the property.

The exemption claim is made for the following property: *(if there are numerous properties, please attach a list that clearly identifies the property and the name and address of the lessee)* 

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 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.

### An affidavit must be attached in which the lessee declares it uses the property for exempt purposes.

CERTIFICATION

I certify (or declare) under penalty of perjury under the laws of the State of California that the fo	pregoing and all information hereon, including any
accompanying statements or documents, is true and correct to the best o	of my knowledge and belief.
SIGNATURE OF RERCON MAKING CLAIM	DATE

SIGNATURE OF PERSON MAKING CLAIM	DATE
NAME OF PERSON MAKING CLAIM	TITLE
EMAIL ADDRESS	DAYTIME TELEPHONE
	( )

# THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION



# 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 QUALIFYIN	g pue	BLIC SCHOOL LESSEE				
MAILING ADDRESS						
CITY, STATE, ZIP COD	)E					
Check the type	of qu	ualifying use of the property				
PUBLIC SCHOOL STATE UNIVERSITY						
COMMUNITY COLLEGE			RNIA			
	E COI	LLEGE				
NAME OF CHURCH						
MAILING ADDRESS						
CITY, STATE, ZIP COD	ЭE					
DATE LEASE SIGNED	1			C	OMMENC	EMENT DATE OF LEASE
		THE ASSESSOR	MAY REQUEST A COPY OF THE LEA	ASE AGREEMENT		
The following property etc. Attach a separ			year. If personal property is beir	ng leased, indica	ate the ty	/pe, make, model, serial number,
PROPERTY TYPE (REAL OR PERSONAL)		CRIPTION				
		espect to lessees that are poli t government entity leasing the		, the property	is locate	ed within the boundaries of the
				rates unrelated	busines	ss taxable income as defined in
		512 of the Internal Revenue ( a copy of the institution's mo		the Internal R	evenue	Service must accompany this
afl	fidavi					xable income to the bookstore's
			CERTIFICATION			
I certify (or declare,		ler penalty of perjury under the la ccompanying statements or docu				nformation hereon, including any and belief.
SIGNATURE OF PERSON	MAKI	NG CLAIM			DATE	
NAME OF PERSON MAKI	NG CL	AIM			TITLE	
EMAIL ADDRESS					DAYTIME	TELEPHONE
					(	)
		THIS DOCUME	NT IS SUBJECT TO PUBL	IC INSPECT	( ION	)

