	1 (05-22) IBRARY OR FREE MUSEUM CLAIM O SOLELY FOR EITHER A FREE PUBLIC LIBRARY	OF TOP	<b>Tara K. Freitas</b> <b>County Assessor/Clerk-Recorder</b> 221 S. Mooney Blvd., Room 102-E Visalia, CA 93291-4593 Ph: (559) 636-5100 Fax: (559) 737-4468			
ample: a person fi 11-2012.") NAME AN	for fiscal year 20 20 ling a timely claim in January 2011 would enter ND MAILING ADDRESS accessary corrections to the printed name and mailing address)		laimant must complete and file this form h the Assessor by February 15.			
∟ If you no longer	seek an exemption at this location, check here 🔲 Sign an	_ d return this form to	the Assessor. Date vacated:			
NAME OF PERSO	N MAKING CLAIM		TITLE			
	ESS OF OWNER OF LAND AND BUILDINGS (if different from above)					
NAME OF INSTITU	ITION					
MAILING ADDRES	S OF INSTITUTION (CITY, STATE, ZIP CODE)					
ADDRESS OF PRO	DPERTY (NUMBER AND STREET)		ASSESSOR'S PARCEL NUMBER			
	CODE		LEASE TERMINATION DATE			
CITY, COUNTY, ZIP CODE						
	EK OPEN TO THE PUBLIC AND HOURS OF OPERATION					
	ype of qualifying exclusive use of the property. If filing for the	e first_time, attach a	copy of the lease or agreement.			
1. 🗌 Yes 📋	No Is admittance to the library or museum free? If no, plea	ise explain:				
2. 🗌 *Yes 🗌	No If a library, is there a user charge for the use of books,	periodicals, or facilit	ies?			
3. 🗌 *Yes 🗌	No If a museum, is there a charge for viewing the museum	contents?				
	*If <b>yes</b> , and a BOE-267, <i>Claim for Welfare Exemption</i> Office immediately. The deadline for timely filing a Clai user charge, a <i>Claim for Welfare Exemption</i> may be al the requirements for the exemption.	m for Welfare Exem	ption is February 15 each year. Where there is			
4. 🗌 Yes 🗌	Io Is the property, or a portion thereof, for which the exemption is claimed a bookstore that generates unrelated business taxable income as defined in section 512 of the Internal Revenue Code?					
		If <b>yes</b> , 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.				
	Property taxes as determined by establishing a ratio					
5. 🗌 Yes 🗌	Property taxes as determined by establishing a ratio	of the unrelated bu	siness taxable income to the bookstore's gros			
	Property taxes as determined by establishing a ratio income will be levied.	of the unrelated bu	siness taxable income to the bookstore's gros			
	Property taxes as determined by establishing a ratio income will be levied. No Is any of the owned property used for sales or business	of the unrelated bu purposes other that g leased or rented fro s of the owner and	siness taxable income to the bookstore's gros n a bookstore? If yes, please explain: om someone else? the type, make, model, and serial number of			
	Property taxes as determined by establishing a ratio income will be levied. No Is any of the owned property used for sales or business No Is any equipment or other property at this location being If <b>yes</b> , list in the remarks section the name and addres	of the unrelated bu purposes other that g leased or rented fro s of the owner and emption, the lessee's he lessee institution venue and Taxation	siness taxable income to the bookstore's gro in a bookstore? If yes, please explain: om someone else? the type, make, model, and serial number of possession is sufficient evidence of use. ; the lessee may be entitled to claim a refund Code.			

EF-268-B-R11-0522-54000176	
----------------------------	--

BOE-268-B (P2) REV. 11 (05-22)

7. List only property that is owned. Leased property may also be exempt if listed under the remarks section below. If leased property is listed, it is not necessary for the lessor to also claim the exemption on the Lessors' Exemption Claim.

PROPERTY DESCRIPTION	STATE PRIMARY AND INCIDENTAL USE OF PROPERTY DESCRIBED
Land: (Legal description or map book, page and parcel number from most recent tax statement)	Primary use:
	Incidental use:
Area: (Acres or square feet)	
Buildings and Improvements	Primary use:
Bldg. No. No. of No. of Type of or Name Floors Rooms Construction	
	Incidental use:
Personal Property: Describe - include cost and acquisition dates if applicable. (Attach a separate sheet if necessary.)	Primary use: Incidental use:

REMARKS

## Whom should we contact during normal business hours for additional information?

NAME		TITLE
DAYTIME TELEPHONE	EMAIL ADDRESS	·
( )		
	CERTIFICATION	N
l certify (or declare) under including any acco	penalty of perjury under the laws of the State of Calil npanying statements or documents, is true, correct, a	fornia that the foregoing and all information contained herein, and complete to the best of my knowledge and belief.
NAME OF PERSON MAKING CLAIM		TITLE
SIGNATURE OF PERSON MAKING C	DATE	
EF-268-B	R11-0522-54000176	