EF-264-AH-R13-0522-23000105-1 BOE-264-AH (P1) REV. 13 (05-22)		IENDOCINO COUNTY ASSESSOR 01 Low Gap Road, Room 1020	
COLLEGE EXEMPTION CLAIM	U U	kiah, CA 95482	
This claim is filed for fiscal year 20 20 (Example: a person filing a t imely claim in J anuary 2011 would enter "2011-2012.")		elephone: (707) 234-6800 ax: (707) 463-6597	
This claim must be filed by 5:00 p.m., February 15.			
CLAIMANT NAME AND MAILING ADDRESS (Make necessary corrections to the printed name and mailing address)	F	FOR ASSESSOR'S USE ONLY	
Г	\neg Received by _	(Assessor's designee)	
	OT	(county or city)	
	on		
L		(date)	
If you no longer seek an exemption at this location, check here \Box S	ign and return this form to the	e Assessor. Date vacated:	
NAME OF CLAIMANT			
TITLE OF CLAIMANT			
CORPORATE NAME OF THE COLLEGE			
ADDRESS (Street, City, County, State, Zip Code)			
ASSESSOR'S PARCEL NUMBER OR LEGAL DESCRIPTION		DATE PROPERTY WAS FIRST USED BY CLAIMANT	
1. Owner and operator: (check applicable boxes)			
Claimant is: Owner and operator Owner only	, ,		
and claims exemption on all Land Duildings and imp		Personal property	
2. Does the above institution qualify as a college or seminary of lear	ing under the laws of the Sta	te of California?	
3. Is the institution conducted as a non-profit entity?			
YES NO			
4. Does the institution require for regular admission the completion of	f a four-year high school cour	se or its equivalent?	
YES NO			
5. Does the institution confer upon its graduates at least one academi and sciences, or on a course of at least three years in professiona	studies, such as law, theolog		
veterinary medicine, pharmacy, architecture, fine arts, commerce,	or journalism?		
YES NO			
6. Is the property for which the exemption is claimed used exclusive	ly for the purposes of educat	ion?	
YES NO			

anton

Katrina Bartolomie

7. List all buildings and other improvements for which exemption is claimed and state the primary and incidental use of each. Attach a separate sheet if necessary. Indicate whether leased or owned. Please use a separate claim form for each Assessor's Parcel Number.

]	INCIDENTAL USE	PRIMARY USE	BUILDING & IMPROVEMENTS

THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION

264-AH-R13-0522-23000105-2 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., Janu YES NO If YES , please explain:	uary 1 of last year?
 9. Is the property, or a portion thereof, for which an exemption is claimed a student bookstore that 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 Servic as determined by establishing a ratio of the unrelated business taxable income to the bookstore 	ce must accompany this claim. Property taxes,
10. Has any of the property listed above been used for business purposes other than a student bo	-
11. If any business is operated by someone other than the college, attach a copy of the lease or o	other agreement. Please explain:
 12. Is any equipment or other property being leased or rented from someone else? YES NO If YES, list on a separate sheet the name and address of the owner and the type, make, m property listed is not used exclusively for educational purposes at the collegiate level, plear 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 Taxation Code.	e lessor, see section 202.2 of the Revenue and
 Attach a separate page showing the requirements for admission. A current catalog substituted. Attach a separate page, or current catalog, listing the degrees conferred upon the grad degree. Attach a copy of the financial statements (balance sheet and operating statement for the statement of the statem	duates and the requirements for each
Whom should we contact during normal business hours for add	itional information?
NAME	TITLE
DAYTIME TELEPHONE EMAIL ADDRESS	
() CERTIFICATION	

SIGNATURE OF PERSON MAKING CLAIM

NAME OF PERSON MAKING CLAIM

DATE

