	Matthew R. Maynard
EF-264-AH-R13-0522-31000060-1 BOE-264-AH (P1) REV. 13 (05-22)	Placer County Assessor 2980 Richardson Dr
COLLEGE EXEMPTION CLAIM	Auburn CA 95603
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.")	Phone: 530-889-4300 Fax: 530-889-4305 assessor@placer.ca.gov
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)	FOR ASSESSOR'S USE ONLY
(□ Received by
	of
	of(county or city)
	on
L	(aate)
If you no longer seek an exemption at this location, check here \square Si	ign and return this form to the Assessor. Date vacated:
NAME OF CLAIMANT	DAYTIME TELEPHONE NUMBER
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 O	
and claims exemption on all Land Duildings and impro	
 2. Does the above institution qualify as a college or seminary of learn YES NO 3. Is the institution conducted as a non-profit entity? YES NO 	ing under the laws of the State of California?
4. Does the institution require for regular admission the completion of	f a four year high school course or its aquivalent?
YES NO	
and sciences, or on a course of at least three years in professional veterinary medicine, pharmacy, architecture, fine arts, commerce, o	or professional degree, based on a course of at least two years in liberal arts studies, such as law, theology, education, medicine, dentistry, engineering, or journalism?
YES NO	
6. Is the property for which the exemption is claimed used exclusivel	ly for the purposes of education?
YES NO	

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.

BUILDING & IMPROVEMENTS	PRIMARY USE	INCIDENTAL USE	
			OWN

THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION

8. Hag 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? 9. If YES NO 11. YES NO 12. YES NO 11. YES NO 11. YES NO 12. Has any of the property listed above been used for business purposes other than a student bookstore? NO 12. If any business is operated by someone other than the college, attach a copy of the lease or other agreement. Please explain: 13. If any business is operated by someone other than the college, attach a copy of the lease or other agreement. Please explain: 14. YES NO 15. If any business is operated by someone other than the college, attach a copy of the lease or other agreement. Please explain: 14. YES NO 15. If any equipment or other property being leased or rented from someone else? 14. YES NO 15. If any equipment or other property devicational purposes at the collegies level, please state the other uses of the property. If property is devicational purposes at the collegies level, please state the other uses of the property. If property, its devicational purposes at the collegies level, please state the other uses of the property. If property, its devicational purposes at		0522-31000060-2)) REV. 13 (05-22)	
Addinated in section 512 of the Internal Revenue Code? If YES NO If YES			
1. Has any of the property listed above been used for business purposes other than a student bookstore? YES NO If YES, please explain: 1. If any business is operated by someone other than the college, attach a copy of the lease or other agreement. Please explain: 1. If any business is operated by someone other than the college, attach a copy of the lease or other agreement. Please explain: 1. If some quipment 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, model, and serial number of the property. If property listed is not used exclusively for educational purposes at the collegiate level, please state the other uses of the property. If property listed the name and address of the owner. Debuefit of a property tax exemption must more to the lessee institution. If taxes paid by the lessor, see section 202.2 of the Revenue taxation Code: DIDITIONAL REQUIRED DOCUMENTATION • Attach a separate page, or current catalog, listing the degrees conferred upon the graduates and the requirements for each cegree. • 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?	as defined i	n section 512 of the Internal Revenue Code?	
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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 ITTLE	YES If YES , lis property I	NO st on a separate sheet the name and address of the owner and the type, make, model, and serial number of the property. If the isted is not used exclusively for educational purposes at the collegiate level, please state the other uses of the property. If real	
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NAME			
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NAME		Whom should we contact during normal business hours for additional information?	
DAYTIME TELEPHONE EMAIL ADDRESS	NAME		
		DNE 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			

SIGNATURE OF PERSON MAKING CLAIM	TITLE
NAME OF PERSON MAKING CLAIM	DATE

