EF-268-B-R11-0522-43000127-1 BOE-268-B (P1) REV. 11 (05-22)

## FREE PUBLIC LIBRARY OR FREE MUSEUM CLAIM

PROPERTY **USED SOLELY** FOR EITHER A FREE PUBLIC LIBRARY OR FREE MUSEUM.

This claim is filed for fiscal year 20\_\_\_\_\_ - 20\_\_\_.

(Example: a person filing a timely claim in January 2011 would enter "2011-2012.")

NAME AND MAILING ADDRESS

(Make necessary corrections to the printed name and mailing address)



## **Greg Monteverde Acting Assessor**

Exemption Division 130 W Tasman Drive San Jose, CA 95134 Ph: (408) 299-6460 FAX: (408) 271-8812 exemptions@asr.sccgov.org www.sccassessor.org

A claimant must complete and file this form with the Assessor by February 15.

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f you no longer seek an exemption at this location, check here 🔲 Sign and return this form to the Assessor. Date vacated:	
NAME OF PERSON MAKING CLAIM	
NAME AND ADDRESS OF OWNER OF LAND AND BUILDINGS (if different from above)	
NAME OF INSTITUTION	
MAILING ADDRESS OF INSTITUTION (CITY, STATE, ZIP CODE)	
ADDRESS OF PROPERTY (NUMBER AND STREET)  ASSESSOR'S PARCEL NUMBER	
CITY, COUNTY, ZIP CODE	
DAYS OF THE WEEK OPEN TO THE PUBLIC AND HOURS OF OPERATION	
Check the type of qualifying exclusive use of the property. If filing for the first time, attach a copy of the lease or agreement.	
☐ LIBRARY ☐ MUSEUM	
1. Yes No Is admittance to the library or museum free? If no, please explain:	
2.   *Yes   No If a library, is there a user charge for the use of books, periodicals, or facilities?	
3.  *Yes No If a museum, is there a charge for viewing the museum contents?	
*If <b>yes</b> , and a BOE-267, Claim for Welfare Exemption, has not been filed for the property, please contact the Asses Office immediately. The deadline for timely filing a Claim for Welfare Exemption is February 15 each year. Where there user charge, a Claim for Welfare Exemption may be allowed if both the organization and the use of the property meet the requirements for the exemption.	e is a
4. Yes No Is the property, or a portion thereof, for which the exemption is claimed a bookstore that generates unrelated business tax income as defined in section 512 of the Internal Revenue Code?	able
If <b>yes</b> , a copy of the institution's most recent tax return filed with the Internal Revenue Service must accompany this of Property taxes as determined by establishing a ratio of the unrelated business taxable income to the bookstore's of income will be levied.	
5.  Yes No Is any of the owned property used for sales or business purposes other than a bookstore? If yes, please explain:	
6. Yes No Is any equipment or other property at this location being leased or rented from someone else?	
If <b>yes</b> , list in the remarks section the name and address of the owner and the type, make, model, and serial number of the property. "Exclusive use" is not required for this exemption, the lessee's possession is sufficient evidence of use.	f
The benefit of a property tax exemption must inure to the lessee institution; the lessee may be entitled to claim a refund of taxes paid by the lessor. See section 202.2 of the Revenue and Taxation Code.	nd

THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION



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<ol><li>List only property that not necessary for the les</li></ol>			empt if listed under the remarks section below. If leased property is listed, it is cors' Exemption Claim.	
PROPERTY DESCRIPTION			STATE PRIMARY AND INCIDENTAL USE OF PROPERTY DESCRIBED	
<ul> <li>□ Land: (Legal description or map book, page and parcel number from most recent tax statement)</li> <li>□ Area: (Acres or square feet)</li> </ul>			Primary use: Incidental use:	
Buildings and Improv	rements		Primary use:	
Bldg. No. No	o. of No. of Rooms	Type of Construction		
1	TF	4/5	Incidental use:	
Personal Property: Do applicable. (Attach a s	escribe - include cos eparate sheet if neces	t and acquisition dates	Incidental use:	
REMARKS	D		MOT	
		U.	SE!	
	Whom should we	contact during norm	al business hours for additional information?	
NAME			TITLE	
	EMA	IL ADDRESS		
DAYTIME TELEPHONE	LIVIA			

DATE



NAME OF PERSON MAKING CLAIM

SIGNATURE OF PERSON MAKING CLAIM