	Stanislaus	Don H. Gaekle	
-264-AH-R13-0522-50000101-1		Stanislaus County Assessor	
BOE-264-AH (P1) REV. 13 (05-22)		1010 Tenth Street, Suite 2400	
COLLEGE EXEMPTION CLAIM	County	Modesto, CA 95354-0863 Phone: (209) 525-6461 • Fax: (209) 525-6586	
This claim is filed for fiscal year 20 20 (Example: a person filing a t imely claim in January 2011 would enter "2011-2012.")	Striving to be the Best	www.stancounty.com/assessor	
This claim must be filed by 5:00 p.m., February 15.			
CLAIMANT NAME AND MAILING ADDRESS	CLAIMANT NAME AND MAILING ADDRESS FOR ASSESSOR'S U		
(Make necessary corrections to the printed name and mailing address)	□ Rece	ived by	
		(Assessor's designee)	
	of	(county or city)	
		(county of city)	
L	on	(date)	
If you no longer seek an exemption at this location, check here [☐ Sign and return this for a sign and return this for a sign and return this for a sign a	orm to the Assessor. Date vacated:	
NAME OF CLAIMANT			
TITLE OF CLAIMANT			ĒR
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 CLAIM	IANT
1. Owner and operator: (check applicable boxes)			
Claimant is: Owner and operator Owner only			
and claims exemption on allLandBuildings and		or Personal property	
2. Does the above institution qualify as a college or seminary of			
YES NO	learning under the laws t	Ji the State of California?	
3. Is the institution conducted as a non-profit entity?			
4. Does the institution require for regular admission the completi	on of a four-year high sc	hool course or its equivalent?	
 5. Does the institution confer upon its graduates at least one acad and sciences, or on a course of at least three years in profess veterinary medicine, pharmacy, architecture, fine arts, comme YES NO 	ional studies, such as lav		

6. Is the property for which the exemption is claimed used exclusively for the purposes of education?

YES NO

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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
			OWN

THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION

-264-AH-R13-0522-50000101-2 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., January 1 of la YES NO If YES , please explain:	ast year?			
 9. Is the property, or a portion thereof, for which an exemption is claimed a student bookstore that generate 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 Service must as determined by establishing a ratio of the unrelated business taxable income to the bookstore's gross 	ccompany this claim. Property taxes,			
 10. Has any of the property listed above been used for business purposes other than a student bookstore? YES NO If YES, please explain: 	s income, will be levied.			
11. If any business is operated by someone other than the college, attach a copy of the lease or other agree	ement, 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, model, and property listed is not used exclusively for educational purposes at the collegiate level, please state to 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 lessor, s Taxation Code.	ee section 202.2 of the Revenue and			
 Attach a separate page showing the requirements for admission. A current catalog showing substituted. Attach a separate page, or current catalog, listing the degrees conferred upon the graduates and degree. Attach a copy of the financial statements (balance sheet and operating statement for the precedent) 	d the requirements for each			
Whom should we contact during normal business hours for additional in				
DAYTIME TELEPHONE EMAIL ADDRESS				
CERTIFICATION				
I certify (or declare) under penalty of periury under the laws of the State of California that the foregoing and all information hereon, including an				

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

SIGNATURE OF PERSON MARING CEAIM	IIILE
NAME OF PERSON MAKING CLAIM	DATE

