EF-264-AH-R11-0514-55000169-1 BOE-264-AH (P1) REV. 11 (05-14)

## **COLLEGE EXEMPTION CLAIM**

This claim is filed for fiscal year 20 \_\_\_\_ - 20 \_\_\_\_. (Example: a person filing a timely claim in January 2011 would enter "2011-2012.")



## Kaenan Whitman Tuolumne County Assessor - Recorder

2 South Green Street, Third Floor Sonora, CA 95370 Phone: (209) 533-5535 Fax: (209) 533-5674

Email: assessor@tuolumnecounty.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                          | e and mailing address)   |   |                   |                   |
|--|--|---|-------------------|-------------------|
| Γ  | ٦  | FOR ASSESSOR                                      | 'S USE ONLY       |                   |
|  |  | Received by                                       |                   |                   |
|  |  | (Assessor   | s designee)       |                   |
|  |  | of(county   | y or city)        |                   |
| L  | ل  | on  |                   |                   |
|  |  |   | date)             |                   |
| NAME OF CLAIMANT   |  |   |                   |                   |
| TITLE OF CLAIMANT  |  |   | DAYTIME TELEPHO   | ONE NUMBER        |
|  |  |   |                   |                   |
| CORPORATE NAME OF THE C <mark>OL</mark> LEGE   |  |   |                   |                   |
| ADDRESS (Street, City, County, State, Zip Code)  |  |   |                   |                   |
|  | $\Lambda$ $\Lambda$ $\Lambda$  |   |                   |                   |
| ASSESSOR'S PARCEL NUMBER OR LEGAL DESC   | RIPTION  | DATE PROPERTY                                     | WAS FIRST USE     | D BY CLAIMAN I    |
| 1. Owner and operator: (check applicable bo  | vesl   |   |                   |                   |
| Claimant is: Owner and operator  |  | ly  |                   |                   |
| and claims exemption on all  | ☐ Buildings and improvements   | and/or Personal propert                           | у                 |                   |
| 2. Does the above institution qu <mark>alify as a co</mark> l  | lege or seminary of learning under   | he laws of the State of California?               |                   |                   |
| YES NO   |  |   |                   |                   |
| 3. Is the institution conducted as a non-profit  | entity?  | <b>V V J J</b>                                    |                   |                   |
| YES NO   |  | V   | _                 |                   |
| <ol> <li>Does the institution require for regular adr<br/>YES NO</li> </ol>                                | nission the completion of a four-yea   | r high school course or its equivale              | ent?              |                   |
| 5. Does the institution confer upon its graduat  | too at loget one academia or profess   | anal dagraa haaad an a sauraa af s                | at locat two year | o in liboral arts |
| and sciences, or on a course of at least th  | ree y <mark>ea</mark> rs in prof <mark>es</mark> siona <mark>l stu</mark> dies, su | uch <mark>as law, theology, e</mark> ducation, me |                   |                   |
| veterinary medicine, pharmacy, architectu  | re, fine arts, commerce, or journalis  | m?  |                   |                   |
| ☐ YES ☐ NO   |  | L   |                   |                   |
| 6. Is the property for which the exemption is  | claimed used <b>exclusively</b> for the p  | urposes of education?                             |                   |                   |
| YES NO   |  |   |                   |                   |
| <ol><li>List all buildings and other improvements<br/>sheet if necessary. Indicate whether lease</li></ol> |  | state the primary and incidental us               | e of each. Attac  | ch a separate     |
| LOCATIONS  | PRIMARY USE  | INCIDENTAL USE                                    |                   |                   |
|  |  |   | LEASE             | OWN               |
|  |  |   | LEASE             | □ OWN             |
|  |  |   | LEASE             |                   |
|  |  |   |                   |                   |

THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION



| 8. Has any construction commenced an YES NO If <b>YES</b> , plea   | nd/or been completed on this parcel since 12:01 a.m., Jase explain:  | anuary 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 inco 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 accompany this claim. Property tax as determined by establishing a ratio of the unrelated business taxable income to the bookstore's gross income, will be levied. |  |   |  |  |
| 10. Has any of the property listed above YES NO If <b>YES</b> , plea   | e been used for business purposes other than a studen ase explain:   | t bookstore?                            |  |  |
| 11. If any business is operated by some  | eone other than the college, attach a copy of the lease o  | or other agreement. Please explain:     |  |  |
| YES NO If <b>YES</b> , list on a separate sheet th   | being leased or rented from someone else?  e name and address of the owner and the type, make ively for educational purposes at the collegiate level, purposes of the owner.   |   |  |  |
| The benefit of a property tax exemply Taxation Code.   | otion must inure to the lessee institution. If taxes paid by  ADDITIONAL REQUIRED DOCUMENTATION  |   |  |  |
| <ul><li>substituted.</li><li>Attach a separate page, or degree.</li></ul>  | nowing the requirements for admission. A current catalogurent catalog, listing the degrees conferred upon the catalogue all statements (balance sheet and operating statement) | graduates and the requirements for each |  |  |
| Whom should we contact during normal business hours for additional information?  |  |   |  |  |
| NAME   |  | TITLE                                   |  |  |
| DAYTIME TELEPHONE  | EMAIL ADDRESS  | I                                       |  |  |
| ( )  | 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 any   |  |   |  |  |
|  | ents or documents, is true, correct, and complete to the   |   |  |  |
| SIGNATURE OF PERSON MAKING CLAIM   |  | TITLE                                   |  |  |
| NAME OF PERSON MAKING CLAIM  |  | DATE                                    |  |  |

