EF-264-AH-R12-0516-57000339-1 BOE-264-AH (P1) REV. 12 (05-16)

COLLEGE EXEMPTION CLAIM

____. rv 2011

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

County of Yolo

YOLO COUNTY COUNTY ASSESSOR

625 Court St, Rm. 104 Woodland, CA 95695 Woodland/Davis (530) 666-8135 West Sacramento (916) 375-6496 Fax (530) 666-8213 assessor@yolocounty.org

This claim must be filed by 5:00 p.m., February 15.

	CLAIMANT NAME AND MAILING ADDRESS (Make necessary corrections to the printed nam	e and mailing address)			
		7	FOR ASSESSOR	'S USE ONLY	
			Received by		
			(Assessor's	designee)	
			of(county	or city)	
	L	_	on		
			(da	ate)	
NAME OF	CLAIMANT				
TITLE OF	CLAIMANT		D	AYTIME TELEPHO	ONE NUMBER
CORPOR	ATE NAME OF THE C <mark>OL</mark> LEGE				
ADDRESS	S (Street, City, County, State, Zip Code)				
A Q Q E Q Q C	DR'S PARCEL NUMBER OR LEGAL DESC	PIPTION	DATE DROPERTY	WAS EIDST LIST	D DV CLAIMANIT
nooeool	DIX 3 FARGEL NUMBER OR LEGAL DESC	ANT HON	DATE PROPERTY	WAS FIRST USEL	DI CLAIIVIAN I
1. Owne	r and operator: (check applicable bo	oxes)			
Claim	ant is:	Owner only Operator on	у		
and c	aims exemption on all	☐ Buildings and improvements	and/or Personal property	/	
		llege or seminary of learning under t	he laws of the State of California?		
	ES NO institution conducted as a non-profi	it optitu?			
	ES NO	it Griffity !	V\J	l .	
		mission the completion of a four-year	r high school course or its equivale	nt?	
	ES NO				
		ites at least one academic or professi			
		nree y <mark>ear</mark> s in prof <mark>es</mark> sion <mark>al studies, su</mark> ure, fi <mark>ne</mark> arts, commerce, or journalis		alcine, dentistry	, engineering
YI	ES NO		<u> </u>		
6. Is the	property for which the exemption is	claimed used exclusively for the p	urposes of education?		
YI	ES NO				
		for which exemption is claimed and ed or owned. Please use a separate			
	UILDING & IMPROVEMENTS	PRIMARY USE	INCIDENTAL USE		
	J. L. L. C. C. M. I. C. T. EMERTIO	TRIMARI OUL	MODENTAL OOL	LEASE	OWN
				LEASE	□ OWN
				LEASE	□ OWN
				LEASE	□ OWN
				LEASE	□ OWN
				LEASE	□ OWN
		1			· · · ·

THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION



8. Has any construction commenced an YES NO If YES , plea	d/or been completed on this parcel since 12:01 a.m., Ja se explain:	nuary 1 of last year?					
as defined in section 512 of the Interr YES NO If YES , a copy of the institution's m	or which an exemption is claimed a student bookstore the nal Revenue Code? ost recent tax return filed with the Internal Revenue Serio of the unrelated business taxable income to the books	vice must accompany this claim. Property taxes					
	been used for business purposes other than a student	-					
YES NO If YES , plea		DOOKS1016 :					
11. If any business is operated by some	one other than the college, attach a copy of the lease or	other agreement. Please explain:					
YES NO If YES , list on a separate sheet the property listed is not used exclusi property, provide the name and add	peing leased or rented from someone else? e name and address of the owner and the type, make, vely for educational purposes at the collegiate level, plaress of the owner. Stion must inure to the lessee institution. If taxes paid by	ease state the other uses of the property. If rea					
Taxation Code. ADDITIONAL REQUIRED DOCUMENTATION							
substituted.	nowing the requirements for admission. A current catalogurer catalogurer to current catalogues, listing the degrees conferred upon the grant catalogues.						
Attach a copy of the financial statements (balance sheet and operating statement for the preceding fiscal year.)							
NAME Whom should	I we contact during normal business hours for ad	ditional information?					
DAYTIME TELEPHONE ()	EMAIL ADDRESS						
,	CERTIFICATION						
	rjury under the laws of the State of California that the for nts or documents, is true, correct, and complete to the b						
SIGNATURE OF PERSON MAKING CLAIM	TITLE						
NAME OF PERSON MAKING CLAIM	DATE						
31 1 ENCOTE IN MAINTO OLANVI	DAIL						

