	IN SEAL		Gus Kramer		
-264-AH-R13-0522-07000062-1 BOE-264-AH (P1) REV. 13 (05-22)			County Asse		
COLLEGE EXEMPTION CLAIM			2530 Arnold Driv Martinez, CA 945		
This claim is filed for fiscal year 20 2	20		FAX: (925) 313-7 Felephone: (925)		
(Example: a person filing a t imely claim in J an would enter "2011-2012.")				inty.us/assessor	
This claim must be filed by 5:00 p.m., Febr	uary 15.				
CLAIMANT NAME AND MAILING ADDRESS (Make necessary corrections to the printed name a	and mailing address)	F	OR ASSESSO	OR'S USE ONLY	7
		Received by	(4	sor's designee)	
				- /	
		of	(co	unty or city)	
		on			
L	-	J 011		(date)	
If you no longer seek an exemption at this loca	ation, check here 🗌 Sign and re	turn this form to th	e Assessor. Da	ate vacated:	
NAME OF CLAIMANT					
TITLE OF CLAIMANT				DAYTIME TELEPH	ONE NUMBER
				()	
CORPORATE NAME OF THE COLLEGE					
ADDRESS (Street, City, County, State, Zip Code)					
ASSESSOR'S PARCEL NUMBER OR LEGAL DESCR	IPTION		DATE PROPER	TY WAS FIRST USE	D BY CLAIMAN
1. Owner and operator: (check applicable box	es)				
Claimant is: Owner and operator	Owner only Operator or	וy			
and claims exemption on all	Buildings and improvements	and/or	Personal prop	erty	
2. Does the above institution qualify as a colle	e or seminary of learning under	the laws of the St	ate of California	1?	
3. Is the institution conducted as a non-profit e	entity?				
YES NO					
4. Does the institution require for regular adm	ission the completion of a four-ye	ar high school cou	irse or its equiv	alent?	
YES NO					
5. Does the institution confer upon its graduate	es at least one academic or profess	sional degree, base	ed on a course o	of at least two yea	rs in liberal art
and sciences, or on a course of at least three			gy, education, r	medicine, dentistr	y, engineering
veterinary medicine, pharmacy, architecture	e, fine arts, commerce, or journalis	sm?			
6. Is the property for which the exemption is c	laimed used exclusively for the p	ourposes of educa	tion?		
YES NO					
7. List all buildings and other improvements for sheet if necessary. Indicate whether leased					
BUILDING & IMPROVEMENTS	PRIMARY USE		NTAL USE		
				□ LEASE	🗌 OWN
					□ OWN □ OWN

THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION

LEASE

LEASE

OWN

OWN



EF-264-AH-R13-0522-07000062-2 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 last year? YES NO If YES, please explain:
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? 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 taxes, 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 been used for business purposes other than a student bookstore?
11. If any business is operated by someone other than the college, attach a copy of the lease or other agreement. Please explain:
12. Is any equipment or other property being leased or rented from someone else?
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 the property listed is not used exclusively for educational purposes at the collegiate level, please state the other uses of the property. If real 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, see section 202.2 of the Revenue and 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		TITLE
DAYTIME TELEPHONE	EMAIL ADDRESS	
()		
	CERTIFICATION	
	f perjury under the laws of the State of California that the foreg ements or documents, is true, correct, and complete to the bes	
SIGNATURE OF PERSON MAKING CLAIM		TITLE
NAME OF PERSON MAKING CLAIM		DATE

