EF-267-R14-1016-31000364-1 BOE-267 (P1) REV. 14 (10-16)

# **CLAIM FOR WELFARE EXEMPTION (FIRST FILING)**

(For new locations and/or in-lieu of preprinted claim form BOE-267-A)



# Matthew R. Maynard Placer County Assessor

2980 Richardson Drive

Auburn, CA 95603-2640
Phone: (530) 889-4300
Email: assessor@placer.ca.gov
Website: www.placer.ca.gov/assessor

This claim is filed for fiscal year 20 20  (Example: a claimant filing a timely claim in January 2017 would enter "2017-201"	(8.")	1.0d.gov/d0000001
LEGAL NAME OF ORGANIZATION		
MAILING ADDRESS (number and street)		
CITY, STATE, ZIP CODE		
WEBSITE ADDRESS (if any)	CORPORATE OR LLC ID NO. (if any)	FEIN/EIN
CHECK ANY OF THE FOLLOWING ITEMS THAT HAVE BEEN CHANGED WITHIN THE L	AST YEAR: MAILING ADDRESS 0	RGANIZATION NAME
ORGANIZATION'S FORMATIVE DOCUMENT (an amendment to articles of incorpora		<del></del>
ORGANIZATIONAL CLEARANCE CERTIFICATE (OCC) NO:	If you do not have an OCC, have you filed a cla	
Provide a copy of the certificate issued by the State Board of Equalization (Board) and a copy of the Finding Sheet issued by the Board.  PRIOR YEAR FILINGS	Yes No If No, see the instructions problem obtaining an OCC	page for information regarding
Has the organization filed for the welfare exemption on any property in this cour <b>1. IDENTIFICATION OF PROPERTY</b>		ate latest year filed:
a. ADDRESS OF PROPERTY (number and street, including suite/unit number if applicable,	)	
CITY	ASSESSOR'S P	ARCEL/ASSESSMENT NUMBER
b. Is this a new location this year?  Yes No c. When was the	property put to exempt use (MM/DD/YYYY	′)?
d. Property owned by the claimant for which claimant seeks exemption (check a		<u>,                                      </u>
· · ·		le Possessory Interest
☐ Land ☐ Buildings and Improvements		
2. REAL PROPERTY. If claiming an exemption on real property, provide:		
a. Date property acquired (MM/DD/YYYY):		
b. Land. Area in acres or square feet:  c. Building and Improve	ements. Building number or name, number	of floors:
d. Use. Describe primary and incidental use of the property:		
e. Real property leased, rented, or used by others (since January 1 of the prior Is any portion of the real property identified under Section 1 used or operatic claimant?		organization other than the
Yes No If <b>Yes</b> , please submit BOE-267-O.		
3. PERSONAL PROPERTY. If claiming an exemption on personal property, property a. Description (type) of the property:	ovide:	
b. Use. Describe primary and incidental use of the property:		
c. Personal property owned by the claimant that is leased, rented, or used by Is any portion of the personal property identified under Section 1 used or o		
Yes No If <b>Yes</b> , attach a description of the property, its use, the nar or agreement.	me of the user, the amount received by you	(if any), and a copy of the lease
d. Equipment leased or rented from another person or organization (since Jar Is any portion of the equipment or other property at the location identified u organization?		from another person or
Yes No If <b>Yes</b> , attach a list of the equipment and other property, description of the exemption, and with tax exempt organization, the property may be eligible for	ill be assessed by the Assessor if owned by the welfare exemption.	a taxable entity. If owned by a
4. TAXABLE POSSESSORY INTEREST. If claiming an exemption on a taxable p a. Name of the public owner (local, state, or federal agency) of the land, build		nt lease agreement and provide:
b. Description of the type of property that is leased from the public owner:		
c. <b>Use</b> . Describe primary and incidental use of the property:		

THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION



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	7 (P2) REV. 14 (1						
	OF PROPERT		athau faailitu (ainaa lannan	. 4 - 4 4 1			
(1) I	s any portion of		other facility (since January fied under Section 1 used to			ner facility that	t sells goods to members of the
	Yes No		hours per week the business	s is operated and	d (B) describe the	type of good	s sold:
(2) I	s the property (	sed as a thrift sho	p as part of a planned, forma	l rehabilitation pr	rogram?		
	Yes 🗌 No	If Yes, submit BOI	E-267-R.				
ls ar		If Yes, describe	under Section 1 used for livi	entation that the	housing is incide	ntal to and rea	asonably necessary for the exempt
	-Income Hous	•	dunder Coetion 1 wood on lo	w income housin	.~?		
	Yes No				•	lity company;	submit BOE-267-L1 if owned by a
	erly or handica		under Section 1 used as a f	acility for the eld	erly or handicapp	ed?	
	Yes □ No	If <b>Yes</b> , submit E including but no	3OE-267-H, unless care or se	ervices are provi	ded or the proper	rty is financed	by the federal government under, mit documentation on the type of
6. UNF	RELATED BUS	NESS TAXABLE	INCOME				
			sought used for activities tha C), and that is subject to the t				xable income," as defined in section
	Yes No	If Yes, attach ea	ach of the following:				
	<ol> <li>A statement applicable</li> <li>A statement</li> <li>A statement</li> </ol>	nt setting forth the a description of that listing the specifi nt setting forth the	e portion of the property on vocativities which produce the	e organization's which those active unrelated busir ganization that is	income producing rities are conductoress taxable incore attributable to ac	g and non-inc ed. me. ctivities in the	ome producing activities, and, when
7. EXP	PANSION						
Doy	you contemplat	e any capital inves	ment in the property within the	ne next year?	☐ Yes ☐ No	If <b>Yes</b> , exp	lain:
8 FIN	ANCIAL STATE	MENTS					
Clai	mant must atta	ch a copy of its ope	erating statement (income and , for the calendar or fiscal ye			assets and lial	pilities), which relate exclusively to
9. OTH	IER - EXEMPT	ACTIVITY AND U	SE				
Plea	ase check all bo	xes that are applic	able:				
	The property	is used for the actu	ual operation of the exempt a	ctivity.			
	member, em	oloyee, contributor		r or operator, or	any other perso	n, through the	officer, trustee, director, shareholder, e distribution of profits, payment of
	The property use is clearly	is not used by the incidental to a prin	owners, operators, or memb nary religious, hospital, scien	ers for fraternal tific, or charitable	or lodge purpose e purpose.	es, or for socia	Il club purposes except where such
		Whom shoul	d we contact during nor	mal business	hours for add	litional info	rmation?
NAME						Т	ITLE
DAVTIME	TELEPHONE		EMAIL ADDRESS				
בין ווואוב	LILLIIIONL		LIVICIL CODINEGO				

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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.

accompanying statements or documents, is true, correct, and complete to the best of my knowledge and belief.			
SIGNATURE OF CLAIMANT	TITLE		
<b>&gt;</b>			
NAME OF PERSON MAKING CLAIM	DATE		
	-		



EMAIL ADDRESS

## INSTRUCTIONS FOR CLAIM FOR WELFARE EXEMPTION (FIRST FILING)

EXEMPTION FROM PROPERTY TAXES UNDER SECTIONS 4(b) AND 5 OF ARTICLE XIII OF THE CONSTITUTION OF THE STATE OF CALIFORNIA AND SECTIONS 214, 254.5 AND 259.5 OF THE REVENUE AND TAXATION CODE

(See also sections 213.7, 214.01-214.1, 215.2, 221-222.5, 225.5, 231, 236, 254-254.6, 259.5, 261, and 270-272 of the Revenue and Taxation Code)

## **FILING OF CLAIM**

A claim for the Welfare Exemption must be filed with the Assessor by the organization owning the property or, in the case where the real property is leased from a public owner (any local, state, or federal government agency), by the lessee organization having a taxable possessory interest<sup>1</sup> in the real property. Real property includes land and improvements. An officer or duly authorized representative of the organization filing the claim must sign the claim form. A separate claim form must be completed and filed for each property location for which exemption is being sought.

The organization filing the claim must provide information on all uses of the property, including information on use by other organizations or persons. Each claim must contain supporting documents, including financial statements.

### ORGANIZATIONAL CLEARANCE CERTIFICATE

An organization seeking the Welfare Exemption shall file with the State Board of Equalization (Board) a claim for an Organizational Clearance Certificate (OCC). The Board reviews each claim to determine whether the organization meets the requirements of Revenue and Taxation Code section 214<sup>2</sup> and issues a certificate to claimants that meet these requirements. The Assessor may not approve a property tax exemption claim until the claimant has been issued a valid OCC. However, your organization may file a claim for exemption with the Assessor, even if the claimant has not yet received the certificate from the Board. If the claim is filed timely with the Assessor, the claim will be considered timely filed even if the claimant has not yet received the OCC from the Board.

To request an OCC, nonprofit organizations must file BOE-277 and limited liability companies must file BOE-277-LLC. These forms are available on the Board's website (www.boe.ca.gov) or by contacting the Exemptions Section at 1-916-274-3430.

#### RECORDATION REQUIREMENT

Section 261 requires that an organization claiming the Welfare Exemption for its real property must have recorded its ownership interest as of the lien date (12:01 a.m., January 1) in the recorder's office of the county in which the property is located. A claimant which, on the lien date has a **possessory interest in publicly owned land, owns water rights, or owns improvements on land owned by another** may in lieu of recordation file a copy of the document giving rise to that possessory interest or water rights or file a written statement attesting to the separate ownership of those improvements with the Assessor. Failure to establish the fact of such recordation to the Assessor constitutes a **waiver** of the exemption.

## TIME FOR FILING

To receive the full exemption, the claimant must **file a claim each year on or before February 15**. Only 90 percent of any tax or penalty or interest thereon may be canceled or refunded when a claim is filed between February 16 of the current year and January 1 of the following calendar year; if the application is filed thereafter, only 85 percent of any tax or penalty or interest thereon may be canceled or refunded. (For real property acquired after the January 1 lien date, to receive full exemption, the claim must be filed within 90 days from the first day of the month following the month in which the property was acquired, or by February 15 of the following calendar year, whichever occurs earlier. Refer to section 271.) The combined tax, penalty and interest may not exceed \$250.

# BOARD-PRESCRIBED FORMS REFERENCED ON THE CLAIM FORM AND IN THE INSTRUCTIONS

BOE-267-A, 20 Claim For Welfare Exemption (Annual Filing)

BOE-267-H, Welfare Exemption Supplemental Affidavit, Housing - Elderly Or Handicapped Families

BOE-267-L, Welfare Exemption Supplemental Affidavit, Housing - Lower Income Households

BOE-267-L1, Welfare Exemption Supplemental Affidavit, Low-Income Housing Property Of Limited Partnership

BOE-267-O, Welfare Exemption Supplemental Affidavit, Organizations And Persons Using Claimant's Real Property

BOE-267-R, Welfare Exemption Supplemental Affidavit, Rehabilitation - Living Quarters

BOE-277, Claim For Organizational Clearance Certificate – Welfare Exemption

BOE-277-LLC, Claim For Organizational Clearance Certificate - Welfare Exemption - Limited Liability Company

# ADDITIONAL INFORMATION

In accordance with Revenue and Taxation Code section 254.5(b)(2), the assessor may institute an audit or verification of the property's use to determine whether both the owner and user of the property meet the requirements of Revenue and Taxation Code section 214.

<sup>&</sup>lt;sup>2</sup> All further statutory references are to the Revenue and Taxation Code, unless otherwise specified.



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<sup>&</sup>lt;sup>1</sup> A taxable possessory interest is defined as the taxable interest held by a private possessor in publically owned real property. (See Assessors' Handbook, Section 510, Assessment of Taxable Possessory Interests (Dec. 2002), page 1.)

#### COMPLETION OF CLAIM FORM

**All questions must be answered.** Failure to answer all questions and provide requested information may result in denial of your claim. Use "not applicable" where needed. The following information is provided to assist you in answering specific questions on your claim.

The fiscal year for which exemption is being sought must be entered correctly. The proper fiscal year follows the lien date (12:01 a.m., January 1) as of which the taxable or exempt status of the property is determined. For example, a person filing a timely claim in February 2017 would enter "2017-2018"; a "2016-2017" entry on a claim filed in February 2017 would signify that a late claim was being filed for the preceding fiscal year.

## Section 1. IDENTIFICATION OF PROPERTY

Identify the situs location (address and city) and Assessor's Parcel/Assessment Number of the property owned for which you are seeking exemption; when the property was put to exempt use; and check the appropriate box(es) to indicate type(s) of property. Claimant is responsible for completing sections 2 through 4 depending on which box(es) are checked under section 1(d). Refer to P3 for the definition of real property and taxable possessory interest. Personal property is defined as all property except real property, such as office furniture, computers, and equipment.

# Section 2. REAL PROPERTY Complete only if "Real Property" was checked under Section 1(d).

- (a) If the exemption is being claimed for real property, enter the date on which the property was acquired.
- (b) Indicate the area and the unit of measurement used (acres or square feet).
- (c) List all buildings and improvements on the land, using additional sheets if necessary.
- (d) Describe the primary use which should qualify the property for exemption and the incidental use(s) of the property since January 1 of the prior year.
- (e) If Yes, submit BOE-267-O, to provide information on every user of your real property.

# Section 3. PERSONAL PROPERTY Complete only if "Personal Property" was checked under section 1(d).

Describe the type of personal property, and the primary use and incidental use(s) of the property since January 1 of the prior year. If yes to (c) or (d), then provide requested information.

**Section 4. TAXABLE POSSESSORY INTEREST** Complete only if "Taxable Possessory Interest" was checked under section 1(d). Attach a copy of the current lease agreement, identify the public owner (local, state, or federal agency) of the publically owned land, buildings and/or improvements, and describe the type of property that is leased from the public owner.

# Section 5. USE OF PROPERTY

- (a)(1) If Yes, describe in sufficient detail to determine the volume of business and the hours open for business since January 1 of the prior year. If a business operation located on the listed parcel has been deliberately omitted because you do not desire the exemption on the business, so state.
- (a)(2) If Yes, submit BOE-267-R.
- (b) If Yes, describe the portion of the property used for living quarters. Submit documentation, including tenets, canons, or written policy, that indicates the organization requires housing be provided to employees and/or volunteers. Include a statement as to why such housing is incidental to and reasonably necessary for the exempt purpose of the organization and the occupant's role or position in the organization. (This question is not applicable where the exempt activity is providing housing, for example, homes for aged, youth, or mentally or physically disabled.) If living quarters are associated with a rehabilitation program, submit BOE-267-R.
- (c) If Yes, submit BOE-267-L if owned by a nonprofit organization or limited liability company; submit BOE-267-L1 if owned by a limited partnership.
- (d) If Yes, submit BOE-267-H, unless care or services are provided or the property is financed by the federal government under, including but not limited to, sections 202, 231, 236, or 811 of the Federal Public Laws. Submit documentation on the type of financing or care/services.

# Section 6. UNRELATED BUSINESS TAXABLE INCOME

If **Yes**, provide the documents and other information requested.

## Section 7. EXPANSION

If Yes, describe the type of investment contemplated and the reasons that make such expansion necessary.

## **Section 8. FINANCIAL STATEMENTS**

Submit the financial statements reflecting the operation of the subject property. The income and expenses should include only those that result from operation of the property. If compensation of personnel or other administrative expenses are pro-rated to the property, such pro-rata should be indicated. If the nature of an item of income or expense is not clear from the account name, further explanation indicating the nature of the account should be appended. **Your claim will not be processed until the financial statements are received by the Assessor.** 

## Section 9. OTHER - EXEMPT ACTIVITY AND USE

Check the appropriate boxes to indicate the requested information.



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