EF-263-C-R03-0522-34000080-1

BOE-263-C (P1) REV. 03 (05-22)

### **CHURCH LESSORS' EXEMPTION CLAIM**

PROPERTY LEASED BY A CHURCH TO A PUBLIC SCHOOL, COMMUNITY COLLEGE, STATE COLLEGE, OR STATE UNIVERSITY, INCLUDING THE UNIVERSITY OF CALIFORNIA, USED JOINTLY WITH A CHURCH

NAME AND MAILING ADDRESS (Make necessary corrections to the printed name and mailing address)



# CHRISTINA WYNN SACRAMENTO COUNTY ASSESSOR

INSTITUTIONAL EXEMPTIONS SECTION 3636 American River Drive, Suite 200 Sacramento, CA 95864-5952 Phone (916) 875-0720 FAX (916) 854-9181 https://assessor.saccounty.gov

L	ل ا	To receive the full exemp be filed with the Assessor		
If you no longer seek an exemption at this location		form to the Assessor. Date vacat	ed:	
IDENTIFICATION OF A PRI IO A NE				
IDENTIFICATION OF APPLICANT LESSOR'S CHURCH OR ORGANIZATION NAME				
ELEGENCO GRIGATORI GINGINILLA MIGINIA MILLA				
MAILING ADDRESS				
CITY, STATE, ZIP CODE				
CORPORATE ID (IF ANY)				
IDENTIFICATION OF PROPERTY				
ADDRESS OF PROPERTY (NUMBER AND STREET)			FISCAL YEAR OF CLAIM 20 20	
CITY, COUNTY, ZIP CODE		ASSESSOR'S PARC	EL NUMBER	
The exemption claim is made for the following property Type	property and the name and ad	Idress of the lessee)		
PROPERTY TYPE	PRIMARY USE(S)	INCIDENT	INCIDENTAL USE	
Land				
Buildings and Improvements				
Personal Property				
NAME OF QUALIFYING PUBLIC SCHOOL INSTITUTION				
MAILING ADDRESS		CITY, STATE, ZIP CODE		
Yes No The total income received by the and usual expenses in maintain	e church in the form of rents, fees, or ling and operating the leased proper		ot exceed the ordinary	
An affidavit must be attached in v	which the lessee declares it us	ses the property for exemp	t purposes.	
	CERTIFICATION			
I certify (or declare) under penalty of perjury under accompanying statements o	r the laws of the State of California tha r documents, is true and correct to the			
SIGNATURE OF PERSON MAKING CLAIM		DATE		
NAME OF PERSON MAKING CLAIM		TITLE		
EMAIL ADDRESS		DAYTIME TELEPHONE ( )	<u> </u>	

THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION



## INSTRUCTIONS FOR FILING CHURCH LESSORS' EXEMPTION CLAIM

#### **IMPORTANT NOTICE**

This claim may be filed to claim the welfare exemption on property leased by a church to a public school, community college, state college, state university, including the University of California when the church and public school or college both use the property in a joint manner. (See Revenue and Taxation Code section 214.6.)

Although the church has previously been granted the religious exemption, which only requires a one-time filing, annual filing of this claim form is required for a property used in conjunction with a public school to be granted the welfare exemption.

Failure to submit the public school or college lessee's affidavit will result in denial of the exemption for the lessor. Submission of the lessee's affidavit after the date the lessors' claim form is due will result in a portion of the exemption being denied. A sample affidavit is included as page 3 of this form.

#### **IDENTIFICATION OF APPLICANT**

Enter your church, corporate or organization information.

#### **IDENTIFICATION OF PROPERTY**

Enter the address of the property for which you are seeking exemption.

#### **FISCAL YEAR**

The fiscal year for which an exemption is 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 2011 would enter "2011-2012" on line four of the claim; a "2010-2011" entry on a claim filed in February 2011 would signify that a late claim was being filed for the preceding fiscal year.

#### **USES OF PROPERTY**

Check each of the types of property being claimed, and state the primary and incidental uses of the property. Primary use may include both church and school use; incidental uses would include others who use the property for meetings, receptions, etc.

Enter the name and address of the public school or college lessee. If additional space is required, or if more than one lessee is being listed, attach an itemized list.

Check the appropriate box to affirm that the total income received by the church in the form of rents, fees, or charges from the lease does not exceed the ordinary and usual expenses in maintaining and operating the leased property. The exemption is not available if the income exceeds the ordinary and usual expenses in maintaining and operating the leased property.

Attach an affidavit in which the public school or college lessee declares it uses the property for exempt purposes.

If the property, or a portion thereof, for which exemption is claimed is a student bookstore that generates unrelated business taxable income as defined in section 512 of the Internal Revenue Code, property taxes are determined by establishing a ratio of the unrelated business taxable income to the bookstore's gross income.



BOE-263-C (P3) REV. 03 (05-22)

## RETURN THIS AFFIDAVIT TO LESSOR

## AFFIDAVIT FOR EXECUTION BY QUALIFYING PUBLIC SCHOOL LESSEES

NAME OF QUALIFYING F	PUBLIC SCHOOL LESSEE		
MAILING ADDRESS			
CITY, STATE, ZIP CODE			
Check the type of	qualifying use of the propert	y □ STATE UNIVERSITY	
☐ COMMUNITY COLLEGE ☐ UNIVERSITY OF CALIFORNIA			
STATE C	OLLEGE		
MAILING ADDRESS			
CITY, STATE, ZIP CODE			
DATE LEASE SIGNED			COMMENCEMENT DATE OF LEASE
The following property	y is leased as of January 1 o	SSOR MAY REQUEST A COPY OF THE LEASE AGR f this year. If personal property is being lease	EEMENT d, indicate the type, make, model, serial number,
PROPERTY TYPE (REAL OR PERSONAL)	PROPERTY TYPE PROPERTY DESCRIPTION		
	respect to lessees that ar npt government entity leasi		operty is located within the boundaries of the
secti If <b>Ye</b> affida	on 512 of the Internal Reve s, a copy of the institution	enue Code. 's most recent tax return filed with the Int	ernal Revenue Service must accompany this ted business taxable income to the bookstore's
		CERTIFICATION	
		the laws of the State of California that the for r documents, is true and correct to the best o	regoing and all information hereon, including any f my knowledge and belief.
SIGNATURE OF PERSON MA	KING CLAIM		DATE
NAME OF PERSON MAKING	CLAIM		TITLE
EMAIL ADDRESS			DAYTIME TELEPHONE ( )

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