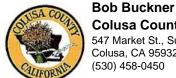
EF-268-B-R10-0514-06000359-1 BOE-268-B (P1) REV. 10 (05-14)

## FREE PUBLIC LIBRARY OR FREE MUSEUM CLAIM

PROPERTY USED SOLELY FOR EITHER A FREE PUBLIC LIBRARY OR FREE MUSEUM.



**Colusa County Assessor** 547 Market St., Suite 101

Colusa, CA 95932 (530) 458-0450

This claim is filed for fiscal year 20\_ - 20

(Example: a person filing a timely claim in January 2011 would enter "2011-2012.")

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

A claimant must complete and file this form

	with the Assessor by February 15.		the Assessor by February 15.		
	L	٦			
NAI	ME OF PERSON M	AKING CLAIM	TITLE		
NAI	ME AND ADDRESS	OF OWNER OF LAND AND BUILDINGS (if different from above)	<u>I</u>		
NAI	ME OF INSTITUTIO	DN .			
MA	ILING ADDRESS O	F INSTITUTION (CITY, STATE, ZIP CODE)			
ADI	DRESS OF PROPE	RTY (NUMBER AND STREET)	ASSESSOR'S PARCEL NUMBER		
CIT	Y, COUNTY, ZIP CO	DDE	LEASE TERMINATION DATE		
DA	YS OF THE WEEK	OPEN TO THE PUBLIC AND HOURS OF OPERATION			
<b>√</b>	Check the type	of qualifying exclusive use of the property. If filing for the first time, attach a c	opy of the lease or agreement.		
	LIBRARY	MUSEUM			
1.	☐ Yes ☐ No	Is admittance to the library or museum free? If no, please explain:			
2.	*Yes No	If a library, is there a user charge for the use of books, periodicals, or facilitie	s?		
3.	*Yes No	lo If a museum, is there a charge for viewing the museum contents?			
		*If <b>yes</b> , and a BOE-267, <i>Claim for Welfare Exemption</i> , has not been filed f Office immediately. The deadline for timely filing a Claim for Welfare Exempt user charge, a <i>Claim for Welfare Exemption</i> may be allowed if both the orga the requirements for the exemption.	ion is February 15 each year. Where there is a		
4.	☐ Yes ☐ No	Is the property, or a portion thereof, for which the exemption is claimed a book income as defined in section 512 of the Internal Revenue Code?	store that generates unrelated business taxable		
		If <b>yes</b> , 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.			
5.	☐ Yes ☐ No	Is any of the owned property used for sales or business purposes other than a	a bookstore? If yes, please explain:		
6.	☐ Yes ☐ No	Is any equipment or other property at this location being leased or rented from	n someone else?		
		If <b>yes</b> , list in the remarks section the name and address of the owner and the property. "Exclusive use" is not required for this exemption, the lessee's poss			
		The benefit of a property tax exemption must inure to the lessee institution; taxes paid by the lessor. See section 202.2 of the Revenue and Taxation Cod			

THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION



7. List only property that is owned. Leased property may also be exempt if listed under the remarks section below. If leased property is listed, it is not necessary for the lessor to also claim the exemption on the Lessors' Exemption Claim

PROPERTY DESCRIPTION		STATE PRIMARY AND INCIDENTAL USE OF PROPERTY DESCRIBED	
Land: (Legal description or map book, page and parcel number from most recent tax statement)		Primary use: Incidental use:	
Area: (Acres or square fee	et)	incidental use.	
Buildings and Improvements  Bldg. No. No. of No. of Type of		Primary use:	
or Name Floors	Rooms Construction		
		Incidental use:	
Personal Property: Describe - include cost and acquisition dates if applicable. (Attach a separate sheet if necessary.)		Primary use:	
		Incidental use:	
EMARKS			
Who	om should we contact during normal	husings hours for additional inf	formation?
IAME	on should we contact during normal	business nours for additional in	TITLE
AYTIME TELEPHONE	EMAIL ADDRESS		
)	CERT	IFICATION	
I certify (or declare) under including any accor	penalty of perjury under the laws of the S npanying statements or documents, is tru		d all information contained herein f my knowledge and belief.
AME OF PERSON MAKING CLAIM			TITLE
IGNATURE OF PERSON MAKING CL	AIM		DATE
LILLIAND OF TENOOR MAKING OF	<del></del>		

