		SEAL OF	C	Gus Kramer		
-264-AH-R13-0522-07000268-1		1000		County Asses		
BOE-264-AH (P1) REV. 13 (05-22) COLLEGE EXEMPTION CLAIM				530 Arnold Drive, Iartinez, CA 9455		
This claim is filed for fiscal year 20	- 20			AX: (925) 313-748 elephone: (925) 3		
(Example: a person filing a t imely claim in Ja would enter "2011-2012.")				ttp://www.cccount		
This claim must be filed by 5:00 p.m., Fe	bruary 15.					
CLAIMANT NAME AND MAILING ADDRESS	a and mailing address)		F	OR ASSESSOF	R'S USE ONLY	/
(Make necessary corrections to the printed nam └	e and maning address)	Г	Received by		's designee)	
					- /	
			of	(count	y or city)	
			on			
L			011	(0	date)	
If you no longer seek an exemption at this lo	ocation, check here 🗌 :	Sign and retu	n this form to th	e Assessor. Date	e vacated:	
NAME OF CLAIMANT						
TITLE OF CLAIMANT						ONE NUMBER
CORPORATE NAME OF THE COLLEGE						
ADDRESS (Street, City, County, State, Zip Code)						
ASSESSOR'S PARCEL NUMBER OR LEGAL DESC	CRIPTION			DATE PROPERTY	WAS FIRST USE	D BY CLAIMAN
1. Owner and operator: (check applicable be	oxes)					
	r Owner only	Operator only				
and claims exemption on all 🛛 🗌 Land	Buildings and imp	provements	and/or	Personal proper	ty	
2. Does the above institution qualify as a co	llege or seminary of lear	rning under th	e laws of the Sta	ate of California?		
3. Is the institution conducted as a non-profi	it entity?					
YES NO						
4. Does the institution require for regular ad	mission the completion	of a four-year	high school cou	rse or its equivale	ent?	
 5. Does the institution confer upon its gradua and sciences, or on a course of at least th veterinary medicine, pharmacy, architectu YES NO 	nree years in professiona	al studies, suc	h as law, theolog			
6. Is the property for which the exemption is	claimed used exclusiv	ely for the pu	poses of educat	tion?		
YES NO						
7. List all buildings and other improvements sheet if necessary. Indicate whether lease						
BUILDING & IMPROVEMENTS	PRIMARY US	SE	INCIDEN	ITAL USE		
						OWN
					LEASE	
					LEASE	

THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION

LEASE

LEASE

OWN

OWN



EF-	-264-AH-R13-0522-07000268-2 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				
	1					
DAYTIME TELEPHONE	EMAIL ADDRESS					
()						
CERTIFICATION						
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.						
SIGNATURE OF PERSON MAKING CLAIM	TITLE					
NAME OF PERSON MAKING CLAIM	DATE					

