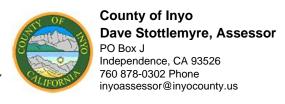
EF-268-B-R10-0514-14000670-1 BOE-268-B (P1) REV. 10 (05-14)

FREE PUBLIC LIBRARY OR FREE MUSEUM CLAIM

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



This claim is filed for fiscal year 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.

			with	ie Assessor by February 15.	
	L	_	J		
NA	ME OF PERSON M	AKING CLAIM	-	TITLE	
NA	ME AND ADDRESS	OF OWNER OF LAND AND BUILDINGS (if different from above)			
NA	ME OF INSTITUTIO	DN			
	II INO ADDDESS O	F NOTITITION (OUT) OTATE TIP CORE)			
MA	ILING ADDRESS O	F INSTITUTION (CITY, STATE, ZIP CODE)			
ADI	DRESS OF PROPE	RTY (NUMBER AND STREET)	A	ASSESSOR'S PARCEL NUMBER	
CIT	Y, COUNTY, ZIP CO	DDE	1	LEASE TERMINATION DATE	
DA'	YS OF THE WEEK	OPEN TO THE PUBLIC AND HOURS OF OPERATION			
_					
√		of qualifying exclusive use of the property. If filing for the	first time, attach a cop	py of the lease or agreement.	
_	LIBRARY	MUSEUM			
1.	Yes No	Is admittance to the library or museum free? If no, pleas	e explain:		
2.	□ *Yes □ No	If a library is there a user charge for the use of books in	eriodicals or facilities?	2	
3.		es No If a library, is there a user charge for the use of books, periodicals, or facilities? Solution No If a museum, is there a charge for viewing the museum contents?			
				r the property places contact the Accessor's	
		*If yes , and a BOE-267, <i>Claim for Welfare Exemption</i> , Office immediately. The deadline for timely filing a Claim user charge, a <i>Claim for Welfare Exemption</i> may be allothe requirements for the exemption.	for Welfare Exemptio	n 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 bookstore that generates unrelated business taxable income as defined in section 512 of the Internal Revenue Code?			
		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.			
5.	☐ Yes ☐ No	Is any of the owned property used for sales or business $\boldsymbol{\mu}$	ourposes other than a	bookstore? If yes, please explain:	
6.	☐ Yes ☐ No	Is any equipment or other property at this location being	eased or rented from	someone else?	
		If yes , list in the remarks section the name and address property. "Exclusive use" is not required for this exemption			
		The benefit of a property tax exemption must inure to th taxes paid by the lessor. See section 202.2 of the Revenue			

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 feet)	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:		
applicable. (Attach a separate sheet ii hecessary.)	Incidental use:		
REMARKS			
Whom should we contact during normal l	ousiness hours for additional inf	ormation?	
NAME		TITLE	
DAYTIME TELEPHONE EMAIL ADDRESS			
CERTII I certify (or declare) under penalty of perjury under the laws of the Sta including any accompanying statements or documents, is true	FICATION te of California that the foregoing and , correct, and complete to the best of	d all information contained herein, f my knowledge and belief.	
NAME OF PERSON MAKING CLAIM		TITLE	
SIGNATURE OF PERSON MAKING CLAIM		DATE	