F-264-AH-R13-0522-20000096-1 BOE-264-AH (P1) REV. 13 (05-22)	PER Burner		Brett Frazier Madera County Assessor 200 West 4th Street
COLLEGE EXEMPTION CLAIM			/ladera, CA 93637-3548
This claim is filed for fiscal year 20 20 (Example: a person filing a timely claim in J and would enter "2011-2012.")	0 Jary 2011	0 ^V F	Phone: (559) 675-7710 Fax: (559) 675-7654 vww.maderacounty.com/government/assesso
This claim must be filed by 5:00 p.m., Febru	uary 15.		
CLAIMANT NAME AND MAILING ADDRESS	-	F	OR ASSESSOR'S USE ONLY
(Make necessary corrections to the printed name an	na mailing address)	□ Received by	(Assessor's designee)
		of	(county or city)
L		on	(date)
If you no longer seek an exemption at this loca	ition, check here 🗌 Sign and r	eturn this form to th	e Assessor. Date vacated:
NAME OF CLAIMANT			
TITLE OF CLAIMANT			DAYTIME TELEPHONE NUMB
CORPORATE NAME OF THE COLLEGE			
ADDRESS (Street, City, County, State, Zip Code)			
ASSESSOR'S PARCEL NUMBER OR LEGAL DESCRIP	PTION		DATE PROPERTY WAS FIRST USED BY CLAIM
	 Owner only Operator Buildings and improvement 	s and/or 🗌	Personal property ate of California?
3. Is the institution conducted as a non-profit e	ntity?		
4. Does the institution require for regular admis	ssion the completion of a four-y	ear high school cou	rse or its equivalent?
 5. Does the institution confer upon its graduates and sciences, or on a course of at least thre veterinary medicine, pharmacy, architecture YES NO 6. Is the property for which the exemption is classified. 	e years in professional studies, , fine arts, commerce, or journa	such as law, theolo lism?	gy, education, medicine, dentistry, enginee
YES NO		parpoolo or cuuda	
7. List all buildings and other improvements for sheet if necessary. Indicate whether leased			
BUILDING & IMPROVEMENTS	PRIMARY USE	INCIDE	NTAL USE

THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION

□ LEASE □ OWN □ LEASE □ OWN

OWN

LEASE



EF-264-AH-R13-0522-20000096-2 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			
DAYTIME TELEPHONE	EMAIL ADDRESS				
()					
CERTIFICATION					
, , , , ,	erjury under the laws of the State of California that the foregoing ents or documents, is true, correct, and complete to the best of n				
SIGNATURE OF PERSON MAKING CLAIM		TITLE			
NAME OF PERSON MAKING CLAIM		DATE			

