EF-263-R13-0522-24000130-1 BOE-263 (P1) REV. 13 (05-22)

LESSORS' EXEMPTION CLAIM

PROPERTY USED FOR FREE PUBLIC LIBRARIES AND FREE MUSEUMS, AND PROPERTY **USED EXCLUSIVELY FOR** PUBLIC SCHOOLS, COMMUNITY COLLEGES, STATE COLLEGES, STATE UNIVERSITIES, UNIVERSITY OF CALIFORNIA, CHURCHES, AND NONPROFIT COLLEGES

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



MERCED COUNTY MATT H. MAY, ASSESSOR

2222 M STREET MERCED, CA 95340 TELEPHONE (209) 385-7631 FAX (209) 725-3956 www.co.merced.ca.us\assessor

This claim must be filed with the Assessor

| | by February 15. | | | |
|--|--|------------------------------|--------------------------------------|--|
| If you no longer each an exemption at this least | _ ion, check here | the Assessor Data vaca | tod: | |
| | on, check here oigh and return this form to t | ine Assessor. Date vaca | ieu | |
| IDENTIFICATION OF APPLICANT LESSOR'S CORPORATE OR ORGANIZATION NAME | | | | |
| | | | | |
| 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 | ASSESSOR'S PARCEL NUMBER | | |
| USE OF PROPERTY Check and state the | nvimory, and incidental avalitying upon of the nea | norti (| | |
| | primary and incidental qualifying uses of the pro roperty: (if there are numerous properties, plea | | ly identifies the | |
| The exemption damnie made for the following p | property and the name and address of | | ny raominino are | |
| PROPERTY TYPE | PRIMARY USE | INCIDENTAL USE | | |
| Land | | | | |
| ☐ Buildings and Improvements | | | | |
| Personal Property | | | | |
| NAME OF QUALIFYING LESSEE INSTITUTION | | | | |
| MAILING ADDRESS | CITY, STATE, ZIP CODE | TY STATE, ZIP CODE | | |
| | | | | |
| | see the exclusive right to possession and use of does not require "exclusive" use. | the property, except tha | t for free public libraries | |
| Yes No Property in this claim for exem (See instructions for property s | ption will be reported by the lessor on a busines tatement filing requirements.) | s property statement sub | omitted to the Assessor. | |
| Yes No An affidavit is attached in which be submitted by the lessor with | n the lessee declares it exclusively uses the prop | perty for exempt purpose | s. If No , the affidavit will | |
| | CERTIFICATION | | | |
| | der the laws of the State of California that the for s or documents, is true and correct to the best of | | | |
| SIGNATURE OF PERSON MAKING CLAIM | DATE | | | |
| NAME OF PERSON MAKING CLAIM | TITLE | | | |
| | | | | |
| EMAIL ADDRESS | | DAYTIME TELEPHON | DAYTIME TELEPHONE | |

INSTRUCTIONS FOR FILING LESSORS' EXEMPTION CLAIM

IMPORTANT NOTICE

A qualifying institution is one whose property is **used for** free public libraries and free museums, and for property **used exclusively for** public schools, community colleges, state colleges, state universities, University of California, churches, and nonprofit colleges.

Failure to submit the lessee's affidavit will result in denial of the exemption for the lessor. Submission of the lessee's affidavit after the date the claim form is due (for taxpayers not required to file a property statement) or after the last day for filing the lessor's property statement without penalty under section 463 of the Revenue and Taxation Code (for taxpayers required to file a property statement) will result in a portion of the exemption being denied. A Lessee's Affidavit is not required for free public library or free museum exemption.

A sample affidavit is included as page 3 of this form.

IDENTIFICATION OF APPLICANT

Enter your company or organization information.

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 2017 would enter "2017-2018" on line five of the claim; a "2016-2017" entry on a claim filed in February 2017 would signify that a late claim was being filed for the preceding fiscal year. The lease must be in effect and the property in use on lien date of the fiscal year for which the exemption is sought. Lessors' Exemptions cannot be prorated based on the commencement date of the lease.

USES OF PROPERTY

Check each of the types of property being claimed, and state the primary and incidental uses of the property.

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

Confirm, by checking the appropriate box, that the lease confers upon the lessee the **exclusive** right to possession and use of the property, except for free public libraries and free museums.

Check the appropriate box regarding property statement reporting. If you own taxable personal property in any county whose aggregate cost is \$100,000 or more for any assessment year, you must file a property statement with the Assessor of that county whether or not specifically requested to do so. Any person not otherwise required to file a statement shall do so upon request of the Assessor, regardless of aggregate cost.

Check the appropriate box to indicate whether the affidavit is attached or will be submitted with the property statement.

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.

PROPERTY TAX BENEFITS

Property tax benefits claimed herein must be passed on to the lessee in the form of:

- (1) Reduction in rental payments (sections 202.2 and 206.2, Revenue and Taxation Code).
- (2) Refund of rental payments, if paid (sections 202.2 and 206.2, Revenue and Taxation Code).
- (3) Claim by lessee under the provisions of section 5096, Revenue and Taxation Code, for a refund of taxes paid by a lessor (section 202.2, Revenue and Taxation Code).

Note: Where the lessee files a claim for an exemption and reports leased property, such property will be allowed the exemption if used in an exempt manner.



EF-263-R13-0522-2400013

BOE-263 (P3) REV. 13 (05-22)

RETURN THIS AFFIDAVIT TO LESSOR

AFFIDAVIT FOR EXECUTION BY QUALIFYING INSTITUTIONAL LESSEES

| NAME OF QUALIFYING LE | SSEE INSTITUTION | | | |
|---|--|---|--|--|
| MAILING ADDRESS | | | | |
| CITY, STATE, ZIP CODE | | | | |
| ✓ Check the type of q | ualifying exclusive use of the pro | perty | | |
| ☐ PUBLIC SCHOOL | | STATE UNIVERSITY | | ☐ NONPROFIT COLLEGE |
| ☐ COMMUNITY COLLEGE | | UNIVERSITY OF CALIFORNIA | | |
| ☐ STATE COLLEGE | | CHURCH | | |
| NAME OF LESSOR | | | | |
| MAILING ADDRESS | | | | |
| CITY, STATE, ZIP CODE | | | | |
| COMMENCEMENT DATE OF LEASE | | DATE PROPERTY PUT TO EXEMPT USE | | |
| The following property etc. Attach a separate I | s leased as of January 1 of this y | SE ATTACH A COPY OF THE LEASI /ear. If personal property is beir | | te the type, make, model, serial number, |
| PROPERTY TYPE (REAL OR PERSONAL) | | PROPERTY DESCRIPTION | | |
| | | | | |
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| | | | | |
| If Yes, | operty described herein, or a por is the congregation of the church the property or portion thereof so | n, religious denomination, or se | ct greater than 5 | |
| | | tudent bookstore that generates | s unrelated busin | ess taxable income as defined in section |
| If Yes, | ty taxes are determined by est | | | e Service must accompany this affidavit. xable income to the bookstore's gross |
| | • | CERTIFICATION | | |
| exemption must go I certify (or declare) und | to this institution by way of a rec | duction in rental payments or a laws of the State of California th | refund in an amo at the foregoing a | institution, and that any benefit from the ount equal to the reduction in taxes. and all information hereon, including any wledge and belief. |
| SIGNATURE OF PERSON MAKI | NG CLAIM | | | DATE |
| NAME OF PERSON MAKING CL | AIM | | | TITLE |
| EMAIL ADDRESS | | | | DAYTIME TELEPHONE |

