EF-571-R-R24-0521-30000364-1 BOE-571-R (P1) REV. 24 (05-21)

## APARTMENT HOUSE PROPERTY STATEMENT FOR 2022

(Declaration of costs and other related property information as of 12:01 A.M., January 1, 2022)



RETURN THIS ORIGINAL FORM. COPIES WILL NOT BE ACCEPTED. **FILE RETURN BY APRIL 1, 2022** NAME AND MAILING ADDRESS (Make necessary corrections to the printed name and mailing address.) Lo Em Ent ST Ent C

# **Claude Parrish Orange County Assessor**

500 S. Main Street, First Floor, Suite 103 Orange, CA 92868-4512 P.O. Box 1949 Santa Ana, CA 92702-1949 (714) 834-2930 www.ocassessor.gov

Γ' '	ŕ	-	ŕ					THE PROPERTY (statement for each	• • • • • • • • • • • • • • • • • • • •		
L						2. [	Enter the tota		or the location listed. in one of the units? No		
cal Telephone Number		Fax Numbe	r			1	f <b>yes</b> , enter t	he unit number			
nail Address	Il rolated accounting	r roordo (inaludo -	rin anda):				During the pe	eriod of January 1, 2	2021 through December 31,		
ter location of general ledger and a	iii reiateu accountinț	CITY	ap code).	STATE	ZIP			ndividual or logal o	entity (corporation, partnership		
REET		CITT		SIAIE	ZIF	(	,	•	) acquire a "controlling		
ter name and telephone number of	authorized person	to contact at location	on of accounting r	ecords:			interest" ( entity? □ Yes [		definition) in this business		
AREFULLY READ AND FOLLOW  1. If you no longer own this prope				iling add	ress of the nev		instruction acquisitio	ns for definition) ir n?	ty also own "real property" (see n California at the time of the		
owner:	,, .						☐ Yes [				
Name						- (	,	. ,	and (2), filer must submit form nange in Control and Ownership		
Mailing Address						_	of Legal	Entities, to the Sta	ite Board of Equalization. See		
City and State Zip Code						instructions for filing requirements.					
<ol> <li>Do any other individuals, partner premises? ☐ Yes ☐ No I</li> </ol>	erships or corporation f yes, list below.	ns do business or o	own personal prop	perty (oth	er than househ	nold fu	rniture and p	ersonal effects of yo	our tenants) located on your		
NAME AND ADDRESS OF O	WNER OF SUCH F	PROPERTY	ı	NATURE	OF THE BUS	INESS	OR PROPE	ERTY			
									ASSESSOR'S USE ONLY		
5. Do you hold furniture or equipn ☐ Yes ☐ No If <b>yes,</b> lis		hers on a loan, ren	tal, or lease basis	s?							
NAME AND ADDRESS OF O	QUANTITY AND DESCRIPTION										
ENTER BELOW the number o     Schedule A. <b>Do not</b> include, ei				erators,	not built-in), an	nd unfu	urnished unit	s. Also complete			
Concado A. Do not morado, or			, , , , , , , , , , , , , , , , , , ,								
FULLY FURNISHED	SLP. ROOM	STUDIO	1 BEDRM.		BEDRM.	3	BEDRM.	LARGER	-		
PARTLY FURNISHED											
UNFURNISHED											
TOTALS											
7. Supplies						Cost					
8. Furniture and appliances				En	iter From Sche						
9. Other furniture and equipment					ter From Sche						
0.					ter i form ochet	uule D					
<u>.                                    </u>											
							TOTAL FU	LL VALUE			
							PERSONA	AL PROPERTY			
							FIXTURES	3			
							OTHER IM	IPROVEMENTS			
							LAND				
									1		

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SCHEDULES OF DEPRECIABLE PROPERTY — SCHEDULES A and B. Items may be listed separately within the year of acquisition on a separate schedule, or items may be grouped by year of acquisition and listed on the schedules below. If you purchased the property as a unit, report on Schedules A & B the previous owner's original cost by the original year of acquisition of the furniture and equipment that was included in your purchase.

Enter the total installed cost including freight, excise taxes, and sales and use taxes of all furniture, and other equipment located on the premises. Include fully depreciated items. Do not include licensed vehicles. Depreciation schedules may be attached if they provide the desired information.

SCHEDULE A FURNITURE AND APPLIANCES (include items in storage do not include built-ins)					SCHEDULE B OTHER FURNITURE AND EQUIPMENT (office, lobby, laund pool, vending, signs, fire extinguishers)						
Year of Acquisition	Original Installed Cost (NOT depreciated book value)	FOR ASSESSOR'S USE ONLY		Year of	Original Installed Cost	FOR ASSESSOR'S USE ONLY					
		Factor	Value	Acquisition	(NOT depreciated book value)	Factor	Value				
2021				2021							
2020				2020							
2019				2019							
2018				2018							
2017				2017							
2016				2016							
2015				2015							
2014				2014							
2013				2013							
2012				2012							
2011 & prior				2011 & prior							
TOTAL COST	\$			TOTAL COS	ST \$						
Enter on line 8	Enter on line 8, page 1.		Enter on line	e 9, page 1.							
REMARKS:											
			ECLARATIO								
statements of	der penalty of perjury under the la or other attachments, and to the	aws of the State best of my kn d, controlled, or	of California th owledge and b managed by th	at I have exa elief it is tru	If you do not do so, it may resu amined this property statement, in ue, correct, and complete and in med as the assessee in this state	ncluding accom	panying schedules, erty required to be				

DATE

TITLE

TITLE

TELEPHONE NUMBER

FEDERAL EMPLOYER ID NUMBER

\*Agent: See page 3 for Declaration by Assessee instructions.

OWNERSHIP TYPE (☑)

Proprietorship

Partnership

Corporation

Other



NAME OF ASSESSEE OR AUTHORIZED AGENT\* (typed or printed)

NAME OF LEGAL ENTITY (other than DBA) (typed or printed)

PREPARER'S NAME AND ADDRESS (typed or printed)

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#### **INSTRUCTIONS**

The Revenue and Taxation Code of the State of California requires that every person, upon request of the Assessor, shall file a written property statement under penalty of perjury with the Assessor within such time as the Assessor may appoint. Please complete this form according to the numbered instructions provided below as your statement of furnishings and related equipment owned, possessed or controlled by you as of 12:01 a.m., January 1, this year at the location listed. Property which you are purchasing under a conditional sales contract must be included. **Return the completed statement form to the Assessor on or before the date stated in the official requirement section.** In all instances, you must return the original BOE-571-R.

#### LINE 3. PROPERTY TRANSFER

**Real Property** – For purposes of reporting a change in control, real property includes land, structures, or fixtures owned or held under lease from (1) a private owner if the remaining term of the lease exceeds 35 years, including written renewal options, (2) a public owner (any arm or agency of local, state, or federal government) for any term or (3) mineral rights owned or held on lease for any term, whether in production or not.

**Controlling Interest –** When any person or legal entity obtains more than 50 percent of the voting stock of a corporation, or more than a 50 percent ownership interest in any other type of legal entity. The interest obtained includes what is acquired directly or indirectly by a parent or affiliated entity.

**Forms, Filing Requirements & Penalty Information –** Contact the Legal Entity Ownership Program Section at 916-274-3410 or refer to the Board's website at *www.boe.ca.gov* to obtain form BOE-100-B, applicable filing requirements, and penalty information.

- **LINE 4.** Check the appropriate box. If **yes** is checked, enter the name and address of the owner of the furniture or equipment. Briefly describe the nature of the business or property. **Do not** report household furnishings owned by tenants and used in their living quarters, or other personal property owned or controlled by tenants.
- **LINE 5.** Check the appropriate box. If **yes** is checked, enter the name and address of the owner or lessor and the quantity and description of the furniture or equipment. The lessor of the items will be asked to declare them.
- **LINE 6.** Enter the number of fully furnished, partly furnished, and unfurnished units in the appropriate column or columns. If the owner of the building (other than a corporation) occupies a unit as his living quarters, do not include it. Please indicate in the **REMARKS** area the items contained in a typical PARTLY FURNISHED apartment of each size. A *sleeping room* is a room with no kitchen facilities; a *studio* contains a kitchen and a convertible living room; a *1 bedrm*. contains a bedroom, living room, kitchen, etc. Attach additional sheets if necessary.
- **LINE 7.** Enter the cost of supplies that are on hand at 12:01 a.m. on January 1 of this year. Include janitorial and pool supplies, whether carried in your asset accounts or expensed.
- LINES 8 and 9. Enter the total cost from Schedules A and B.
- SCHEDULE A. Complete the schedule as instructed. If a portion of the furniture used in your rental units has been placed in storage, include the cost in the schedule and enter in the remarks the address where stored. **Do not** include built-in appliances, installed carpeting, or drapes as furniture; such items are considered part of the building. **Include** ranges, refrigerators, dishwashers, etc., if not built-in.
- **SCHEDULE B.** Complete the schedule as instructed. **Include** all equipment not reported in Schedule A. If you care to attach a schedule listing types of equipment separately, you may do so.

### **DECLARATION BY ASSESSEE**

The law requires that this property statement, regardless of where it is executed, shall be declared to be true under penalty of perjury under the laws of the State of California. The declaration must be signed by the assessee, a duly appointed fiduciary, or a person authorized to sign on behalf of the assessee. In the case of a **corporation**, the declaration must be signed by an officer or by an employee or agent who has been designated in writing by the board of directors, by name or by title, to sign the declaration on behalf of the corporation. In the case of a **partnership**, the declaration must be signed by a partner or an authorized employee or agent. In the case of a **Limited Liability Company** (LLC), the declaration must be signed by an LLC manager, or by a member where there is no manager, or by an employee or agent designated by the LLC manager or by the members to sign on behalf of the LLC.

When signed by an employee or agent, other than a member of the bar, a certified public accountant, a public accountant, an enrolled agent or a duly appointed fiduciary, the assessee's written authorization of the employee or agent to sign the declaration on behalf of the assessee must be filed with the Assessor. The Assessor may at any time require a person who signs a property statement and who is required to have written authorization to provide proof of authorization.

A property statement that is not signed and executed in accordance with the foregoing instructions is not validly filed. The penalty imposed by section 463 of the Revenue and Taxation Code for failure to file is applicable to unsigned property statements.

THIS STATEMENT IS NOT A PUBLIC DOCUMENT. THE INFORMATION DECLARED WILL BE HELD SECRET BY THE ASSESSOR.

