EF-263-C-R03-0522-39000122-1

BOE-263-C (P1) REV. 03 (05-22)

CHURCH LESSORS' EXEMPTION CLAIM

PROPERTY LEASED BY A CHURCH TO A PUBLIC SCHOOL, COMMUNITY COLLEGE, STATE COLLEGE, OR STATE UNIVERSITY, INCLUDING THE UNIVERSITY OF CALIFORNIA, USED JOINTLY WITH A CHURCH

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



Steve J. Bestolarides Assessor-Recorder-County Clerk

San Joaquin County 44 N San Joaquin Street Suite 230 Stockton, CA 95202-3273 Exemptions: (209) 468-2646 https://www.sjgov.org/department/assessor

L	To receive the full exemption, this claim must be filed with the Assessor by February 15.			
If you no longer seek an exemption at this location	, check here Sign and return this for	m to the Ass	essor. Date vacat	ed:
IDENTIFICATION OF APPLICANT				
LESSOR'S CHURCH 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 ASSESSOI				EL NUMBER
The exemption claim is made for the following property TYPE Land	perty: (if there are numerous properties property and the name and addre PRIMARY USE(S)			
Buildings and Improvements				
Personal Property				
NAME OF QUALIFYING PUBLIC SCHOOL INSTITUTION				
MAILING ADDRESS CITY			STATE, ZIP CODE	
Yes No The total income received by the and usual expenses in maintain	e church in the form of rents, fees, or ching and operating the leased property.		the lease does no	ot exceed the ordinary
An affidavit must be attached in v	which the lessee declares it uses	s the prop	erty for exemp	t purposes.
	CERTIFICATION			
I certify (or declare) under penalty of perjury under accompanying statements o	r the laws of the State of California that the documents, is true and correct to the b			
SIGNATURE OF PERSON MAKING CLAIM			DATE	
NAME OF PERSON MAKING CLAIM			TITLE	
EMAIL ADDRESS			DAYTIME TELEPHONI	<u> </u>

THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION



INSTRUCTIONS FOR FILING CHURCH LESSORS' EXEMPTION CLAIM

IMPORTANT NOTICE

This claim may be filed to claim the welfare exemption on property leased by a church to a public school, community college, state college, state university, including the University of California when the church and public school or college both use the property in a joint manner. (See Revenue and Taxation Code section 214.6.)

Although the church has previously been granted the religious exemption, which only requires a one-time filing, annual filing of this claim form is required for a property used in conjunction with a public school to be granted the welfare exemption.

Failure to submit the public school or college lessee's affidavit will result in denial of the exemption for the lessor. Submission of the lessee's affidavit after the date the lessors' claim form is due will result in a portion of the exemption being denied. A sample affidavit is included as page 3 of this form.

IDENTIFICATION OF APPLICANT

Enter your church, corporate or organization information.

IDENTIFICATION OF PROPERTY

Enter the address of the property for which you are seeking exemption.

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 2011 would enter "2011-2012" on line four of the claim; a "2010-2011" entry on a claim filed in February 2011 would signify that a late claim was being filed for the preceding fiscal year.

USES OF PROPERTY

Check each of the types of property being claimed, and state the primary and incidental uses of the property. Primary use may include both church and school use; incidental uses would include others who use the property for meetings, receptions, etc.

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

Check the appropriate box to affirm that the total income received by the church in the form of rents, fees, or charges from the lease does not exceed the ordinary and usual expenses in maintaining and operating the leased property. The exemption is not available if the income exceeds the ordinary and usual expenses in maintaining and operating the leased property.

Attach an affidavit in which the public school or college lessee declares it uses the property for exempt purposes.

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.



RETURN THIS AFFIDAVIT TO LESSOR

AFFIDAVIT FOR EXECUTION BY QUALIFYING PUBLIC SCHOOL LESSEES

NAME OF QUALIFYING F	PUBLIC SCHOOL LESSEE		
MAILING ADDRESS			
CITY, STATE, ZIP CODE			
Check the type of	qualifying use of the prope	erty	
☐ PUBLIC SCHOOL ☐ STATE UNIVERSITY			
☐ COMMUNITY COLLEGE ☐ UNIVERSITY OF CALIFORNIA		UNIVERSITY OF CALIFORNIA	
STATE C	OLLEGE		
MAILING ADDRESS			
CITY, STATE, ZIP CODE			
DATE LEASE SIGNED			COMMENCEMENT DATE OF LEASE
	THE ASS	SESSOR MAY REQUEST A COPY OF THE LEASE AGREE	
The following propert etc. Attach a separate		of this year. If personal property is being leased,	indicate the type, make, model, serial number
PROPERTY TYPE (REAL OR PERSONAL))	PROPERTY DESCRIPTION	
	respect to lessees that a npt government entity lea	are political subdivisions of the state, the propsing the same.	perty is located within the boundaries of the
	property, or a portion ther on 512 of the Internal Re	reof, is a student bookstore that generates unre	elated business taxable income as defined in
If Ye affida	s, a copy of the institution	on's most recent tax return filed with the Interestermined by establishing a ratio of the unrelate	
		CERTIFICATION	
I certify (or declare) u		der the laws of the State of California that the fore s or documents, is true and correct to the best of r	
SIGNATURE OF PERSON MA			DATE
NAME OF PERSON MAKING	CLAIM		TITLE
EMAIL ADDRESS			DAYTIME TELEPHONE
			()

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