EF-571-R-R23-0520-50000413-1

BOE-571-R (P1) REV. 23 (05-20)

# APARTMENT HOUSE PROPERTY STATEMENT FOR 2021

(Declaration of costs and other related property information as of 12:01 A.M., January 1, 2021)



## Don H. Gaekle Stanislaus County Assessor

1010 Tenth Street, Suite 2400 Modesto, CA 95354-0863 Phone: (209) 525-6461 • Fax: (209) 525-6586 www.stancounty.com/assessor

RETURN THIS ORIGINAL FORM. COPIES WILL NOT BE ACCEPTED.

LE RETURN BY APRIL 1, 202											
NAME AND MAILING ADDRESS (Make necessary corrections to the printed name and mailing address.)						LOCATION OF THE PROPERTY (street, city)					
L,					(file a separate statement for each location)						
					2. E	nter the tota	al number of units fo	or the location listed.			
							Do you live in one of the units?				
						Yes No					
Fax Number Fax Number						yes, enter	the unit number				
Email Address						<ol><li>During the period of January 1, 2020 through December 31, 2020:</li></ol>					
Enter location of general ledger and	all related accounting	records (include z	rip code):								
STREET	S	TATE ZIP	_ (	<ul> <li>(1) Did any individual or legal entity (corporation, partnership, limited liability company, etc.) acquire a "controlling</li> </ul>							
						interest" (see instructions for definition) in this business					
Enter name and telephone number o	f authorized person to	contact at location	n of accounting rec	ords:	_	entity? Yes	No				
					_ (	2) If YES, d	d this business enti	ty also own "real property" (see			
CAREFULLY READ AND FOLLOW	THE ACCOMPANY	NG INSTRUCTIO	NS.			instructions for definition) in California at the time of the acquisition?					
<ol> <li>If you no longer own this prop owner:</li> </ol>	erty as of January 1	of this year, show t	he name and mailir	ng address of the ne	w	Yes	No				
Name					_ (:	3) If YES to	both questions (1)	and (2), filer must submit form			
Mailing Address						BOE-100-B, Statement of Change in Control and Ownership of Legal Entities, to the State Board of Equalization. See					
_					_		ns for filing requiren				
City and State			Zip Code		_						
Do any other individuals, partn premises? Yes No	erships or corporation If <b>yes</b> , list below.	ns do business or o	own personal proper	ty (other than house	ehold fu	rniture and p	ersonal effects of yo	our tenants) located on your			
NAME AND ADDRESS OF O	OWNER OF SUCH P	ROPERTY	NA	TURE OF THE BU	SINESS	OR PROP	ERTY				
								ASSESSOR'S USE ONLY			
Do you hold furniture or equip	ment helonging to oth	nere on a loan ren	tal or lease hasis?								
	ist below.	iers on a loan, ren	iai, or lease basis:								
NAME AND ADDRESS OF OWNER OF SUCH PROPERTY QUANTITY					ND DESCRIPTION						
6. ENTER BELOW the number of Schedule A. <b>Do not</b> include, e				ators, not built-in), a	ınd unfu	ırnished unit	s. Also complete				
	SLP. ROOM	STUDIO	1 BEDRM.				LARGER				
FULLY FURNISHED	OLI : NOOM	310010	I DEDICIN.	Z DEDINI.	- 31	BEDRM.	LANGER				
PARTLY FURNISHED											
UNFURNISHED											
TOTALS											
7. Supplies					Cost						
· ·											
8. Furniture and appliances Enter From Schedule A  9. Other furniture and equipment Enter From Schedule B											
Other furniture and equipment				Enter From Sch	edule b						
10.											
						TOTAL EL	JLL VALUE				
							AL PROPERTY				
						FIXTURES					
						OTHER IMPROVEMENTS  LAND					

BOE-571-R (P2) REV. 23 (05-20)

**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 APPLIAN do not include built-ins)	CES (include it	ems in storage	SCHEDULE B OTHER FURNITURE AND EQUIPMENT (office, lobby, la pool, vending, signs, fire extinguishers)					
Year of Acquisition	Original Installed Cost (NOT depreciated book value)	FOR ASSESSOR'S USE ONLY		Year of	Original Installed Co	FOR ASSESSOR'S USE ONLY			
		Factor	Value	Acquisition	(NOT depreciated book v	alue) F	actor	Value	
2020				2020					
2019				2019					
2018				2018					
2017				2017					
2016				2016					
2015				2015					
2014				2014					
2013				2013					
2012				2012					
2011				2011					
2010 & prior				2010 & prior					
TOTAL COST Enter on line 8,	·			TOTAL COS	·				
		Г	DECLARATIO	N BY ASSI	ESSEE				
	Note: The following dec					ov result in ne	enalties		
statements of	er penalty of perjury under the lar other attachments, and to the ch is owned, claimed, possesse	aws of the State e best of my kr	e of California th nowledge and b	at I have exa elief it is tru	amined this property state ue, correct, and complete	ment, includin and includes	g accompa all prope	rty required to be	
OWNERS		E OR AUTHORIZEI	D AGENT*			DATE			

TITLE

TITLE

TELEPHONE NUMBER

FEDERAL EMPLOYER ID NUMBER

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

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)

#### **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.

