EF-264-AH-R11-0514-54000745-1 BOE-264-AH (P1) REV. 11 (05-14)

COLLEGE EXEMPTION CLAIM

This claim is filed for fiscal year 20 ____ - 20 ____. (Example: a person filing a timely claim in January 2011 would enter "2011-2012.")



Tara K. Freitas County Assessor/Clerk-Recorder

221 S. Mooney Blvd., Room 102-E Visalia, CA 93291-4593 Ph: (559) 636-5100 Fax: (559) 737-4468

This claim must be filed by 5:00 p.m., February 15.

	CLAIMANT NAME AND MAILING ADDRESS (Make necessary corrections to the printed name and mailing address)						
			٦	FOR ASSESSOR'S USE ONLY			
				Received by _			
					(Assessor's de	signee)	
				of	(county or c	city)	
	L			on			
					(date)		
NAME OF	F CLAIMANT						
TITLE OF	CLAIMANT				DAY (TIME TELEPHO	ONE NUMBER
CORPOR	RATE NAME OF THE COLLEGE						
ADDRES	S (Street, City, County, State, Zip Code)						
	5 (5.155), 55amy, 5tate, 2/p 55aby						
ASSESS	OR'S PARCEL NUMBER OR LEGAL DESC	RIPTION			DATE PROPERTY WA	AS FIRST USE	D BY CLAIMANT
Claim and control of the control of	er and operator: (check applicable between the second operator) of the above institution qualify as a confession of the above institution conducted as a non-profit of the institution conducted as a non-profit of the institution require for regular address of the institution confer upon its gradual of the institution confer upon its gradual of the institution confer upon its gradual of the institution, pharmacy, architectures of the property for which the exemption is the property for which the exemption is the property for which the improvements of the property for which the improvements of the property for the property for which the exemption is the	Owner only Ope Buildings and improve lege or seminary of learning t entity? mission the completion of a tes at least one academic or here years in professional str here, fine arts, commerce, or j claimed used exclusively for which exemption is claimed ed or owned.	four-year profession udies, suc journalism	and/or e laws of the State high school cour hal degree, base h as law, theolog poses of education	se or its equivalent? d on a course of at le py, education, medic on? and incidental use o	east two year ine, dentistry	y, engineering
	LOCATIONS	PRIMARY USE		INCIDEN	TAL USE		
						LEASE	\square OWN
						LEASE	\square OWN
						LEASE	\square OWN
						LEASE	\square OWN
						LEASE	\square OWN
						LEASE	\square OWN

THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION



8. Has any construction commenced and/or been completed on this parcel since 12:01 a.m., January 1 YES NO If YES , please explain:	of last year?						
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 bookston YES NO If YES , please explain:	re?						
11. If any business is operated by someone other than the college, attach a copy of the lease or other and	greement. Please explain:						
12. Is any equipment or other property being leased or rented from someone else? YES NO							
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							
I certify (or declare) under penalty of perjury under the laws of the State of California that the foregoing accompanying statements or documents, is true, correct, and complete to the best of m							
SIGNATURE OF PERSON MAKING CLAIM	TITLE						
NAME OF PERSON MAKING CLAIM	DATE						
	D/112						

