	DI OF	NON	Kaenan Whitm	nan	
F-264-AH-R13-0522-55000243-1 BOE-264-AH (P1) REV. 13 (05-22)			Tuolumne Cou 2 South Green Stre		or-Recorde
COLLEGE EXEMPTION CLAIM			Sonora, CA 95370		
This claim is filed for fiscal year 20 2 (Example: a person filing a t imely claim in J ar would enter "2011-2012.")		RAL	Phone: (209) 533-{ Fax: (209) 533-567 Email: assessor@t	74	ca.gov
This claim must be filed by 5:00 p.m., Feb	ruary 15.				
CLAIMANT NAME AND MAILING ADDRESS (Make necessary corrections to the printed name :	and mailing address)	l	FOR ASSESSOF	R'S USE ONLY	
	and maning addressy	□ Received by	(1	's designee)	
				s designee)	
		of	(count	ty or city)	
		on			
L			((date)	
If you no longer seek an exemption at this loc	ation, check here 🗌 Sign and	return this form to th	ne Assessor. Date	e vacated:	
NAME OF CLAIMANT					
TITLE OF CLAIMANT				DAYTIME TELEPH	ONE NUMBER
CORPORATE NAME OF THE COLLEGE				()	
CORFORATE NAME OF THE COLLEGE					
ADDRESS (Street, City, County, State, Zip Code)					
ASSESSOR'S PARCEL NUMBER OR LEGAL DESCR	RIPTION		DATE PROPERTY	Y WAS FIRST USE	D BY CLAIMANT
1. Owner and operator: (check applicable boy Claimant is: Owner and operator	<i>kes)</i> Owner only Operator	only			
and claims exemption on all	Buildings and improvemen	-] Personal proper	t v	
2. Does the above institution qualify as a colle	-				
YES NO	ege of seminary of learning uno				
3. Is the institution conducted as a non-profit	entitv?				
YES NO					
 Does the institution require for regular adm 	hission the completion of a four-	ear high school co	urse or its equival	ent?	
YES NO		J			
5. Does the institution confer upon its graduate	es at least one academic or profe	ssional degree, bas	ed on a course of	at least two year	rs in liberal arts
and sciences, or on a course of at least thr	ee years in professional studies	such as law, theolo			
veterinary medicine, pharmacy, architectur	e, fine arts, commerce, or journa	alism?			
		<i>.</i> .			
6. Is the property for which the exemption is a	claimed used exclusively for the	e purposes of educa	ation?		
YES NO					
7. List all buildings and other improvements for sheet if necessary. Indicate whether lease					
BUILDING & IMPROVEMENTS	PRIMARY USE	INCIDE	NTAL USE		
					OWN

THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION

LEASE

LEASE

OWN

OWN



EF-	-264-AH-R13-0522-55000243-2 BOE-264-AH (P2) REV. 13 (05-22)
	 8. Has any construction commenced and/or been completed on this parcel since 12:01 a.m., January 1 of last year? YES NO If YES, please explain:
	 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 bookstore? YES NO If YES , please explain:
	11. If any business is operated by someone other than the college, attach a copy of the lease or other agreement. Please explain:
	12. Is any equipment or other property being leased or rented from someone else?
	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	EMAILADDRESS					
()						
CERTIFICATION						
I certify (or declare) under penalty of perjury under the laws of the State of California that the foregoing and all information hereon, including any accompanying statements or documents, is true, correct, and complete to the best of my knowledge and belief.						
SIGNATURE OF PERSON MAKING CLAIM		TITLE				
NAME OF PERSON MAKING CLAIM		DATE				

