EF-263-C-R03-0522-56000210-1

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)



Keith Taylor Assessor Of Ventura County

800 South Victoria Avenue Ventura, CA 93009-1270 (805) 654-2181 assessor.venturacounty.gov

L	be filed with the Assessor by February 15.				
If you no longer seek an exemption at this location	n, check here 🔲 Sign and return this	form to the Ass	essor. Date vacate	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			ASSESSOR'S PARC	EL NUMBER	
	OF PROPERTY Check and state the primary and incidental qualifying uses of the property. exemption claim is made for the following property: (if there are numerous properties, please attach a list that clearly identifies the property and the name and address of the lessee) PROPERTY TYPE PRIMARY USE(S) INCIDENTAL USE				
Land					
☐ Buildings and Improvements					
☐ Personal Property					
NAME OF QUALIFYING PUBLIC SCHOOL INSTITUTION					
MAILING ADDRESS CI			TY, STATE, ZIP CODE		
Yes No The total income received by the and usual expenses in maintain An affidavit must be attached in the second secon	ning and operating the leased prope	erty.		•	
	CERTIFICATION				
I certify (or declare) under penalty of perjury under accompanying statements of	r the laws of the State of California th or documents, is true and correct to th				
SIGNATURE OF PERSON MAKING CLAIM			DATE		
NAME OF PERSON MAKING CLAIM			TITLE		
EMAIL ADDRESS			DAYTIME TELEPHONE	<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 QUALIFY	ING PUBLIC SCHOOL LES	SSEE				
MAILING ADDRESS	;					
CITY, STATE, ZIP CO	ODE					
Check the tvi	pe of qualifying use of	the property				
	LIC SCHOOL	and property	STATE UNIVERSITY			
COMMUNITY COLLEGE			UNIVERSITY OF CALIFORI	NIA		
_	TE COLLEGE		_ onverter i or onen or a			
NAME OF CHURCH						
MAILING ADDRESS						
CITY, STATE, ZIP CO	ODE					
DATE LEASE SIGNE	ED			С	COMMENCEMENT DA	TE OF LEASE
		THE ASSESSOR N	MAY REQUEST A COPY OF THE LEAS	SE AGREEMENT	Γ	
			ear. If personal property is being	leased, indic	ate the type, make	, model, serial number
	arate listing if necessa	iry.				
PROPERTY TY (REAL OR PERSO			PROPERTY DESCR	RIPTION		
	With respect to lesse exempt government of		cal subdivisions of the state, same.	the property	is located within	the boundaries of the
	The property, or a por section 512 of the Inte		student bookstore that genera	tes unrelated	d business taxable	income as defined in
I	If Yes, a copy of the	institution's mos	st recent tax return filed with t			
	gross income.		, ,			
			CERTIFICATION			
I certify (or decla			ws of the State of California that ments, is true and correct to the			
SIGNATURE OF PERSO	ON MAKING CLAIM				DATE	
NAME OF PERSON MA	AKING CLAIM				TITLE	
EMAIL ADDRESS					DAYTIME TELEPHONI	<u> </u>
					()	

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