EF-264-AH-R13-0522-56000199-1 BOE-264-AH (P1) REV. 13 (05-22)		COUNTY ASSES		Keith Taylor Assessor Of Vo		nty
COLLEGE EXEMPTION CLAIM			121	00 South Victoria A entura, CA 93009-		
This claim is filed for fiscal year 20 (Example: a person filing a t imely claim in J a would enter "2011-2012.")		COUNTY, CH	(8)	805) 654-2181 ssessor.venturaco		
This claim must be filed by 5:00 p.m., Fel	oruary 15.					
CLAIMANT NAME AND MAILING ADDRESS	-		F	OR ASSESSOR	'S USE ONLY	,
(Make necessary corrections to the printed name	e and mailing address)	Г	Received by			
				(Assessor's	s designee)	
			of	(county	or city)	
			on			
L		L	on	(d	ate)	
If you no longer seek an exemption at this lo						
TITLE OF CLAIMANT				D	AYTIME TELEPH	ONE NUMBER
				()	
CORPORATE NAME OF THE COLLEGE						
ADDRESS (Street, City, County, State, Zip Code)						
ASSESSOR'S PARCEL NUMBER OR LEGAL DESC	RIPTION			DATE PROPERTY	WAS FIRST USE	D BY CLAIMANT
 Owner and operator: (check applicable book claimant is: Owner and operator and claims exemption on all Land Does the above institution qualify as a co YES NO 	Owner only	provements	and/or	Personal property	y	
3. Is the institution conducted as a non-profi	t entity?					
4. Does the institution require for regular add	mission the completion	of a four-yea	r high school coui	rse or its equivale	nt?	
5. Does the institution confer upon its gradua and sciences, or on a course of at least th veterinary medicine, pharmacy, architectu YES NO	ree years in profession	al studies, su	ch as law, theolog			
6. Is the property for which the exemption is	claimed used exclusiv	rely for the pu	rposes of educat	ion?		
 List all buildings and other improvements sheet if necessary. Indicate whether lease 						
BUILDING & IMPROVEMENTS	PRIMARY U	SE	INCIDEN	ITAL USE		
						OWN

THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION

□ LEASE □ OWN □ LEASE □ OWN

OWN

LEASE

EF-264-AH-R13-0522-56000199-2 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?
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	EMAIL ADDRESS					
()						
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				

