EF-571-R-R26-0523-04000101-1 BOE-571-R (P1) REV. 26 (05-23)

APARTMENT HOUSE PROPERTY STATEMENT FOR 2024

(Declaration of costs and other related property information as of 12:01 A.M., January 1, 2024)

FILE RETURN BY APRIL 1, 2024

RETURN THIS ORIGINAL FORM. COPIES WILL NOT BE ACCEPTED.



Alyssa Douglass Butte County Assessor

25 County Center Dr Suite 100 Oroville, CA 95965-3382 (530)538-7721 Fax (530) 538-7991

Email: assessorsoffice@buttecounty.net Website: www.buttecounty.net/assessor

NAME AND MAILING ADDRES								
(Make necessary correction	ns to the printed name	e and mailing add	ress.)	\neg				
·								
							THE PROPERTY	
					(file	a separate	statement for each	location)
					-			
1				1	2. E	nter the tot	al number of units t	for the location listed.
							'	in one of the units?
and Talendary Manager		E. N. ot.	_				Pes _] No
ocal Telephone Number		Fax Numbe					the unit number	
inter location of general ledger and a	all related accounting	records (include a	rin code):			ouring the po	eriod of January 1,	2023 through December 31,
TREET	an outed descenting	CITY		STATE ZIP			individual or legal	entity (corporation, partnership
TINEET		OIII		SIAIL ZII	,	limited lia	ability company, etc	c.) acquire a "controlling
inter name and telephone number of	fauthorized person to	contact at location	on of accounting re	cords:		interest" entity?	(see instructions fo	or definition) in this business
inter name and telephone number of	dutionzed person to	cornact at location	on accounting to	cords.		☐ Yes	□ No	_
					_ (tity also own "real property" (see
CAREFULLY READ AND FOLLOW								in California at the time of the
If you no longer own this proposition owner:	erty as of January 1 o	of this year, show t	the name and maili	ing address of the ne	ew	acquisitio ☐ Yes		
						3) If YES to	both questions (1	and (2), filer must submit form
Name								hange in Control and Ownership
Mailing Address			Zip Code				entities, to the Stone Stone Stone Stone	ate Board of Equalization. Seements.
Do any other individuals, partners	erships or corporation	s do business or c		erty (other than bous	ehold fu	niture and r	personal effects of y	your tenants) located on your
premises?	If yes , list below.		on porconal prope		0.1014	, mark and p		our tomarno, rooutou on your
NAME AND ADDRESS OF O	WNER OF SUCH PE	ROPERTY	N.	ATURE OF THE BU	SINESS	OR PROP	ERTY	
								ASSESSOR'S
								USE ONLY
Do you hold furniture or equipr	ment belonging to oth	ers on a loan, ren	tal, or lease basis?	,				
	st below.	, , ,	,					
NAME AND ADDRESS OF O	WNER OF SUCH PE	ROPERTY		QUANTITY AN	ND DES	CRIPTION		
6. ENTER BELOW the number of	of fully furnished, part	y furnished (e.g.,	stoves and refrige	rators, not built-in), a	and unfu	rnished uni	ts. Also complete	_
Schedule A. Do not include, ei	ither here or in Sched	ule A, any unit in	which you live.			_		
	SLP. ROOM	STUDIO	1 BEDRM.	2 BEDRM.	3 1	BEDRM.	LARGER	
FULLY FURNISHED]
PARTLY FURNISHED								
UNFURNISHED								
TOTALS								
7. Supplies					Cost			
Furniture and appliances				Enter From Sch				
Other furniture and equipment				Enter From Sch				
				Litter i Tom Sch	iedule D			
10.								
					г	TOTAL FI	JLL VALUE	
							AL PROPERTY	
						FIXTURE		
							MPROVEMENTS	
						LAND		

BOE-571-R (P2) REV. 26 (05-23)

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 ite	ems in storage,	SCHEDUL	E B OTHER FURNITURE AN pool, vending, signs, fire e	D EQUIPMENT (o extinguishers)	ffice, lobby, la	
	Original Installed Cost	FOR ASSESSO	FOR ASSESSOR'S USE ONLY		Original Installed Cost	FOR ASSESSOR'S USE ONLY		
	(NOT depreciated book value)	Factor	Value	Acquisition	(NOT depreciated book value)	Factor	Value	
2023				2023				
2022				2022				
2021				2021				
2020				2020				
2019				2019				
2018				2018				
2017				2017				
2016				2016				
2015				2015				
2014				2014				
2013 & prior				2013 & prior				
TOTAL COST	\$			TOTAL COS	ST \$			
Enter on line 8	, page 1.			Enter on line	9, page 1.			
REMARKS:								

DECLARATION BY ASSESSEE

Note: The following declaration must be completed and signed. If you do not do so, it may result in penalties.

I declare under penalty of perjury under the laws of the State of California that I have examined this property statement, including accompanying schedules, statements or other attachments, and to the best of my knowledge and belief it is true, correct, and complete and includes all property required to be reported which is owned, claimed, possessed, controlled, or managed by the person named as the assessee in this statement at 12:01 a.m. on January 1, 2024.

OWNERSHIP TYPE (☑)		SIGNATURE OF ASSESSEE OR AUTHORIZED AGENT*	DATE	
		NAME OF ASSESSEE OR AUTHORIZED AGENT* (typed or printed)	TITLE	
Proprietorship				
Partnership		NAME OF LEGAL ENTITY (other than DBA) (typed or printed)	FEDERAL EMPLOYER ID NUMBER	
Corporation				
Other	_ 🗆	PREPARER'S NAME AND ADDRESS (typed or printed)	TELEPHONE NUMBER	TITLE

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



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.

