EF-264-AH-R13-0522-27000091-1 BOE-264-AH (P1) REV. 13 (05-22) COLLEGE EXEMPTION CLAIM This claim is filed for fiscal year 20 20 (Example: a person filing a t imely claim in J anuary 2011 would enter "2011-2012.")	NONTERED CALIFO HESO - VIEN	Xochitl Marina Camacho Monterey County Assessor P. O. Box 570 Salinas, CA 93902-0570 Phone: (831) 755-5035 Fax: (831) 755-5435 assessor@co.monterey.ca.us
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) Г	□ Received	FOR ASSESSOR'S USE ONLY d by
L	on	(date)
NAME OF CLAIMANT TITLE OF CLAIMANT CORPORATE NAME OF THE COLLEGE ADDRESS (Street, City, County, State, Zip Code)	S /	DAYTIME TELEPHONE NUMBER
ASSESSOR'S PARCEL NUMBER OR LEGAL DESCRIPTION 1. Owner and operator: (check applicable boxes) Claimant is: Owner and operator Owner only 	Operator only	DATE PROPERTY WAS FIRST USED BY CLAIMANT
 and claims exemption on all Land Buildings an 2. Does the above institution qualify as a college or seminary of YES NO 3. Is the institution conducted as a non-profit entity? YES NO 		Personal property e State of California?
 4. Does the institution require for regular admission the complete YES NO 5. Does the institution confer upon its graduates at least one accar and sciences, or on a course of at least three years in profession veterinary medicine, pharmacy, architecture, fine arts, common YES NO 6. Is the property for which the exemption is claimed used exclassion of the property for which the exemption is claimed used exclassion. 	ademic or professional degree, ssional studies, such as law, th herce, or journalism?	based on a course of at least two years in liberal arts beology, education, medicine, dentistry, engineering,

YES NO

7. List all buildings and other improvements for which exemption is claimed and state the primary and incidental use of each. Attach a separate sheet if necessary. Indicate whether leased or owned. Please use a separate claim form for each Assessor's Parcel Number.

BUILDING & IMPROVEMENTS	PRIMARY USE	INCIDENTAL USE		
				OWN
			LEASE	OWN

THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION

-264-AH-R13-0522-27000091-2 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 la YES NO If YES , please explain:	ast year?		
 9. Is the property, or a portion thereof, for which an exemption is claimed a student bookstore that generate 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 a 	ccompany this claim. Property taxes,		
as determined by establishing a ratio of the unrelated business taxable income to the bookstore's gross	s 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 agree	ement, 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 property listed is not used exclusively for educational purposes at the collegiate level, please state to 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, so Taxation Code.	see section 202.2 of the Revenue and		
 Attach a separate page showing the requirements for admission. A current catalog showing substituted. 			
Attach a separate page, or current catalog, listing the degrees conferred upon the graduates and degree.			
Attach a copy of the financial statements (balance sheet and operating statement for the precedence)	ding fiscal year.)		
···· · · · · · · · · · · · · · · · · ·			
Whom should we contact during normal business hours for additional in	formation?		
DAYTIME TELEPHONE EMAIL ADDRESS			
CERTIFICATION			
I certify (or declare) under penalty of periury under the laws of the State of California that the foregoing and	l all information hereon including any		

 I certify (or deciare) 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

