| EF-264-AH-R13-0522-29000107-1 | Star Barris | Nevada County Assessor |
|---|-------------------------|---|
| BOE-264-AH (P1) REV. 13 (05-22) | | 950 Maidu Avenue |
| COLLEGE EXEMPTION CLAIM | * | P.O. Box 599002 |
| 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.") | CALIFORNIA | Nevada City, CA 95959-7902 Telephone (530) 265-1232 Fax (530) 265-9858 assessor@nevadacountyca.gov |
| This claim must be filed by 5:00 p.m., February 15. | | |
| CLAIMANT NAME AND MAILING ADDRESS | | FOR ASSESSOR'S USE ONLY |
| (Make necessary corrections to the printed name and mailing address) | □ Recei | ved by |
| | | (Assessor's designee) |
| | of | (county or city) |
| | | (county or city) |
| L | on | (date) |
| | | (646) |
| If you no longer seek an exemption at this location, check here \Box S | Sign and return this fo | rm to the Assessor. Date vacated: |
| | | |
| NAME OF CLAIMANT | | C |
| TITLE OF CLAIMANT | | DAYTIME TELEPHONE NUMBER |
| CORPORATE NAME OF THE COLLEGE | | , , , , , , , , , , , , , , , , , , , |
| | | |
| ADDRESS (Street, City, County, State, Zip Code) | | |
| ASSESSOR'S PARCEL NUMBER OR LEGAL DESCRIPTION | | DATE PROPERTY WAS FIRST USED BY CLAIMANT |
| | | |
| | | |
| 1. Owner and operator: (check applicable boxes) | | |
| Claimant is: Owner and operator Owner only O | | |
| and claims exemption on all Land Duildings and imp | | |
| 2. Does the above institution qualify as a college or seminary of learn | ning under the laws o | f the State of California? |
| | | |
| 3. Is the institution conducted as a non-profit entity? | | |
| YES NO | | |
| 4. Does the institution require for regular admission the completion of | of a four-year high sch | nool course or its equivalent? |
| YES NO | | |
| Does the institution confer upon its graduates at least one academic and sciences, or on a course of at least three years in professional veterinary medicine, pharmacy, architecture, fine arts, commerce, | I studies, such as law | |
| | | |
| 6. Is the property for which the exemption is claimed used exclusive | y for the purposes o | f education? |
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TY OF NE.

Rolf D. Kleinhans

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 |
| | | | - | |

THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION

| -264-AH-R13-0522-29000107-2 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 taxe 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? YES NO 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 reproperty, 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 an 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

 NAME OF PERSON MAKING CLAIM

 DATE

