BOE-264-AH (P1) REV. 10 (05-12)

COLLEGE EXEMPTION CLAIM

This claim is filed for fiscal year 20 ____ - 20 ___ . (Example: a person filing a timely claim in January 2011 would enter "2011-2012.")



Carmen Chu, Assessor-Recorder Office of the Assessor-Recorder City and County of San Francisco 1 Dr. Carlton B. Goodlett Place, Room 190 San Francisco, CA 94102 www.sfassessor.org (415) 554-5596

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This claim must be filed by 5:00 p.m.. February 15.

11115	ciaiiii iiiust be iiieu by 5.00 p.iii., Fei	ordary 15.				
	CLAIMANT NAME AND MAILING ADDRESS (Make necessary corrections to the printed nam	e and mailing address)				
	Γ	コ	F	OR ASSESSOR'S	S USE ONLY	
			Received by _			
			Trederved by _	(Assessor's d	designee)	
			of	(county c	or oity)	
	L	_		(county c	n city)	
			on	(dat	te)	
NAME	OF CLAIMANT					
TITLE	OF CLAIMANT			DA	YTIME TELEPH	ONE NUMBER
				()	
CORP	ORATE NAME OF THE COLLEGE					
ADDR	ESS (Street, City, County, State, Zip Code)					
4005		PURTION		DATE PROPERTY.	AVA O ELDOT LIGE	D DV OL AIMANIT
ASSE	SSOR'S PARCEL NUMBER OR LEGAL DESC	RIPTION		DATE PROPERTY V	WAS FIRST USE	D BY CLAIMAN I
1 Ov	ner and operator: (check applicable bo	oxes)				
		Owner only	у			
an	d claims exemption on all	☐ Buildings and improvements	and/or	Personal property		
2. Do	es the above institution qualify as a co	llege or seminary of learning under the	ne laws of the Sta	te of California?		
	YES NO					
3. Is	the institution conducted as a non-profi	t entity?				
	YES NO					
4. Do	es the institution require for regular ad	mission the completion of a four-yea	high school cour	se or its equivalen	nt?	
	YES NO	, , ,		·		
5. Do	es the institution confer upon its gradua	tes at least one academic or profession	onal degree, base	d on a course of at	least two year	s in liberal arts
an	d sciences, or on a course of at least the	nree years in professional studies, su	ch as law, theolog	y, education, med	licine, dentistry	y, engineering,
vei	erinary medicine, pharmacy, architectuly YES NO	ire, line arts, commerce, or journalist	11 ?			
6. Is	the property for which the exemption is	claimed used exclusively for the pu	irposes of educati	on?		
	YES NO					
	t all buildings and other improvements eet if necessary. Indicate whether lease		state the primary	and incidental use	of each. Attac	ch a separate
	LOCATIONS	PRIMARY USE	INCIDEN	TAL USE		
					LEASE	OWN
					LEASE	OWN

BOE-264-AH (P2) REV. 10 (05-12)							
8. Has any construction commenced and/or been completed on this parcel since 12:01 a.m., January 1 of YES NO If YES , please explain:	of last year?						
9. Is the property, or a portion thereof, for which an exemption is claimed a student bookstore that gener 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 as determined by establishing a ratio of the unrelated business taxable income to the bookstore's graduaters.	et accompany this claim. Property taxes,						
10. Has any of the property listed above been used for business purposes other than a student bookstore?							
YES NO If YES , please explain: 11. If the business is operated by someone other than the college, attach a copy of the lease or other ag	reement. 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, a property listed is not used exclusively for educational purposes at the collegiate level, please sta 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 lesso Taxation Code.	r, see section 202.2 of the Revenue and						
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 a accompanying statements or documents, is true, correct, and complete to the best of m	y knowledge and belief.						
SIGNATURE OF PERSON MAKING CLAIM	TITLE						
NAME OF PERSON MAKING CLAIM	DATE						