CLAIM FOR WELFARE EXEMPTION (FIRST FILING)

(For new locations and/or in-lieu of preprinted claim form BOE-267-A)

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

would enter "2011-2012.")

☐Yes ☐ No

SUSAN M. RANOCHAK, Mendocino County Assessor

501 Low Gap Rd., Room 1020 Ukiah, CA 95482 Phone (707) 234-6800 Fax (707) 463-6597

NAME OF ORGANIZATION				
ADDRESS (number and street)				
CITY, STATE, ZIP CODE				
WEBSITE ADDRESS (if any)	CORPORATE ID NO. (if any)			
	ORGANIZATION'S FORMATIVE DOCUMENT (amendment to artinstrument, articles of organization)			
ORGANIZATIONAL CLEARANCE CERTIFICATE NUMBER	CANIZATIONAL CLEARANCE CERTIFICATE NUMBER Provide a copy of the certificate issued by the State Board of Equalization (Board), and a copy the finding sheet issued by the Board.			
Yes No If No, see instructions for obta	ficate (OCC), have you filed a claim for an OCC with the Board ining an OCC. In this county in prior years? Yes No If Yes, state: (a)			
and claims exemption on all Land	Owner only	. ,		
CITY, STATE, ZIP CODE		ASSESSOR'S PARCEL NUMBER		
3. Is this a new location this year?	4. When was the property put to exempt use?	(MM/DD/YYYY)		
5. Real property. If claiming an exemption for real pr	(MM/DD/YYYY)			
5.(a) Land . If seeking an exemption on land, provide	AREA			
(2) Primary and incidental use of the property de	scribed:			
5.(b) Building or Improvements : If seeking an exem (1) Building number or name, number of floors, t	nption on buildings or improvements, provide the following: ype of construction:			
(2) Primary and incidental use of the property de	scribed:			
6. Personal Property : If seeking an exemption on personal Property description (type):	ersonal property, provide the following:			
(b) Primary and incidental use of the property de	escribed:			
	r)? leased, or being used or operated part time or full time by sontion of that portion and its use, attach a copy of the agreem			

If **Yes**, attach a list of equipment and other property at this location that is being leased, rented, or consigned to the claimant. Please list the name and address of lessor or consignor and the quantity and description of the property, and attach to the claim. Property so listed is not subject to the exemption, and will be assessed by the Assessor if owned by a taxable entity.

(b) Is any equipment or other property at this location being leased, rented, or consigned from someone else?

Is any porti		If Yes, describe that portion. Submit documentate	housing or housing for the elderly or handicapped) for any person? tion that the housing is incidental to and reasonably necessary for the ters are associated with a rehabilitation program, submit BOE-267-R. See
	ortion of the pr	ty (since January 1 of prior year)? operty used to operate a store, thrift shop, or other If Yes, (1) list the hours per week the business is (2) describe the nature of articles sold:	facility making sales to members or the general public? perated and;
	roperty used a	s a thrift shop as part of a planned, formal rehabilital If Yes , submit BOE-267-R.	tion program?
10. Low-Inco Is this pro ☐Yes	perty used as	ow-income housing? If Yes and the property is owned by a nonprofit on Yes and the property is owned by a limited partne	panization or limited liability company, BOE-267-L must be submitted. If ship, BOE-267-L1 must be submitted.
11. Elderly or Is this pro ☐Yes	perty used as	a facility for the elderly or handicapped?	or services are provided or the property is financed by the federal of the Federal Public Laws.
		capital investment in the property within the next y If Yes , explain:	ear?
section 51 Yes (1) The or (2) A state applic (3) A state (4) A state franch 14. Please che The emp chai The incic 15. Financial s	2 of the Intern No ganization's internet setting able, a descriptement listing thement setting hise taxation, a teck the following property is used property is not oloyee, contributes or competed property is not dental to a print statements related this claim a celly preceding the	al Revenue Code and that is subject to the tax imp If Yes , you must attach to this claim each of the fo formation and tax returns filed with the Internal Re forth the amount of time devoted to the organiza ation of that portion of the property in which those a e specific activities which produce the unrelated by forth the amount of income of the organization that nd the amount of total income of the organization that and if applicable: and for the actual operation of the exempt activity. At used or operated by the owner or by any other putor, or bondholder of the owner or operator, or a ansations, or the more advantageous pursuit of the at used by the owners or members for fraternal or lo many religious, hospital, scientific, or charitable purp ating exclusively to this property's location. Topy of your operating statement (income, expens	enue Service for its immediately preceding fiscal year. ion's income-producing and nonincome-producing activities, and, where ctivities are conducted. siness taxable income. at is attributable to activities in the state and is exempt from income or nat is attributable to activities in the state. erson so as to benefit any officer, trustee, director, shareholder, member, by other person, through the distribution of profits, payment of excessive cusiness or profession. Ige purposes, or for social club purposes except where such use is clearly cose. es) and balance sheet (assets, liabilities) for the calendar or fiscal year
NAME			TITLE
DAYTIME TELEPH	HONE	EMAIL ADDRESS	'
\ /		CERTIFIC	ATION
I certify (or de			California that the foregoing and all information hereon, including any nd complete to the best of my knowledge and belief.
SIGNATURE OF P			TITLE
NAME OF PERSO	N MAKING CLAIM		DATE

INSTRUCTIONS FOR FILING A CLAIM FOR WELFARE EXEMPTION FROM PROPERTY TAX

EXEMPTION FROM PROPERTY TAXES UNDER SECTIONS 4(b) AND 5 OF ARTICLE XIII OF THE CONSTITUTION OF THE STATE OF CALIFORNIA AND SECTIONS 214, 254.5 AND 259.5 OF THE REVENUE AND TAXATION CODE

(See also sections 213.7, 214.01-214.1, 215.2, 221-222.5, 225.5, 231, 236, 254-254.6, 259.5, 261, and 270-272 of the Revenue and Taxation Code)

GENERAL INFORMATION

FILING OF CLAIM

Claims for the Welfare Exemption must be signed and filed **with the Assessor.** Each claim must contain supporting documents **including financial statements**.

An officer or duly authorized representative of the organization **owning** the property must sign the claim. An officer or duly authorized representative of the organization **operating** the property must sign and file a separate claim. If an organization both owns and operates the property, only one claim need be signed and filed with the Assessor for each property location. A separate claim form must be completed and filed for each property for which exemption is sought.

The Assessor will supply claim forms and supporting documents upon request. A copy of the claim should be retained by the organization. It is recommended that the retained copy be submitted to the Assessor for acknowledgment of filing by entry of the date and the Assessor's or the designee's signature. This copy will serve as a record of filing should there be any later question relative thereto.

ORGANIZATIONAL CLEARANCE CERTIFICATE

An organization that is seeking the Welfare Exemption shall file with the State Board of Equalization (Board) a claim for an Organizational Clearance Certificate. The Board shall review each claim to determine whether the organization meets the requirements of section 214 and shall issue a certificate to a claimant that meets these requirements. The Assessor may not approve a property tax exemption claim until the claimant has been issued a valid Organizational Clearance Certificate. If the claim is filed timely with the Assessor, the claim will be considered timely filed even if the claimant has not yet received the Organizational Clearance Certificate from the Board.

Claim form BOE-277, Claim for Organizational Clearance Certificate - Welfare Exemption, is available on the Board's website (www.boe. ca.gov) or you may request a form by contacting the Exemptions Section at 916-274-3430.

PRIOR YEAR FILINGS

Year filed is the year in which the claim was submitted to the Assessor. State the exact name under which the organization filed for the year indicated.

RECORDATION REQUIREMENT

Revenue and Taxation Code section 261 requires that an organization claiming the Welfare Exemption for its real property must have recorded its ownership interest as of the lien date (12:01 a.m., January 1) in the recorder's office of the county in which the property is located.

A claimant which on the lien date has a **possessory interest in publicly owned land, owns water rights**, or **owns improvements on land owned by another** may in lieu of recordation file a copy of the document giving rise to that possessory interest or water rights or file a written statement attesting to the separate ownership of those improvements with the Assessor. Failure to establish the fact of such recordation to the Assessor constitutes a **waiver** of the exemption.

TIME FOR FILING

To receive the full exemption, the claimant must **file a claim each year on or before February 15.** Only 90 percent of any tax or penalty or interest thereon may be canceled or refunded when a claim is filed between February 16 of the current year and January 1 of the following calendar year; if the application is filed thereafter, only 85 percent of any tax or penalty or interest thereon may be canceled or refunded. In no case, however, is the tax, penalty, and interest for a given year to exceed \$250.

ADDITIONAL INFORMATION

The owner and the operator must furnish additional information to the Assessor, if requested. The Assessor may institute an audit or verification of the operations of the owner and of the operator and may request additional information from the claimant.

PREPARATION OF CLAIM

The term *property* as used here means any operating unit of property consisting of one parcel or several contiguous parcels for which exemption is sought even though there may be several improvements and separate buildings thereon. All personal property for which exemption is sought should also be listed.

If the owner and operator of the property are not the same, each must execute a separate claim and give the information requested. **All questions must be answered.** Failure to answer all questions may result in denial of your claim. Leave no blanks; use "no," "none," or "not applicable" where needed. The following information is provided to assist you in answering specific questions on your claim.

The fiscal year for which exemption is sought must be entered correctly. The proper fiscal year follows the lien date (12:01 a.m., January 1) as of which the taxable or exempt status of the property is determined. For example, a person filing a timely claim in February 2011 would enter "2011-2012"; a "2010-2011" entry on a claim filed in February 2011 would signify that a late claim was being filed for the preceding fiscal year.

- **Line 1.** If the owner and operator of any portion of the property are not the same, **both must file a claim,** and each must meet all of the requirements to obtain the exemption.
- Line 2. Enter the property address, city, state, zip code, and Assessor's Parcel Number.
- Line 5. If the exemption is being claimed for real property, enter the date on which the property was acquired.
 - (a)(1) Indicate the area and the unit of measurement used (acres or square feet.)
 - (2) List the primary use which should qualify the property for exemption and the incidental use or uses of the property since January 1 of the prior year.
 - (b)(1) List all buildings and improvements on the land. Use additional sheets if necessary. Describe as stucco, concrete and steel, brick, wood, etc.
 - (2) List the **primary use** and the incidental use or uses of the property since January 1 of the prior year.
- **Line 6.** (a) List the type of personal property;
 - (b) List the primary use and the incidental use or uses since January 1 of the prior year.
- **Line 7.** (a) Copies of leases or agreements must be submitted if the answer is yes. If the leases or other agreements have been filed in prior years, it is only necessary to attach copies of subsequent extensions, modifications, and changes.
 - (b) If the answer is yes, provide the names and addresses of the lessors and consignors and list the quantity and description of the property.
- **Line 8.** If the answer is **yes**, describe the portion of the property used for living quarters. Submit documentation, including tenets, canons, or written policy, that indicates the organization requires housing be provided to employees and/or volunteers. Include statement why such housing is incidental to and reasonably necessary for the exempt purpose of the organization and the occupant's role or position in the organization. (This question is not applicable where the exempt activity is providing housing, for example, homes for aged, youth, mentally or physically disabled.)
- **Line 9.** If the answer is **yes**, describe in sufficient detail to determine the volume of business and the hours open for business since January 1 of the prior year. If a business operation located on the listed parcel has been **deliberately omitted**, because you do not desire the exemption on the business, so state.
- Line 12. If the answer is yes, describe the type of investment contemplated and the reasons that make such expansion necessary.
- Line 13. If the answer is yes, provide the documents and other information requested.
- **Line 15.** In submitting the financial statements, the operating statement should be restricted to the financial transactions relating to the operation of the subject property. The income should include only those receipts that result from the operation of the property and should not include receipts from invested funds, gifts, or other items that do not result directly from the operation of the property.

The expenditures should be limited to those resulting from the operation of the property. Any expenses of the organization or expenses extraneous to the operating unit should not be included. If compensation of personnel or other administrative expenses are pro-rated to the property, such pro-rata should be indicated. If the nature of an item of income or disbursement is not clear from the account name, further explanation indicating the nature of the account should be appended. **Your claim will not be processed until the financial statements are received by the Assessor.**