DN CC	John Tuteur
EF-264-AH-R13-0522-28000083-1	Napa County Assessor-Clerk-Recorder
BOE-264-AH (P1) REV. 13 (05-22) COLLEGE EXEMPTION CLAIM	1127 First St Room 128 Napa, CA 94559
This claim is filed for fiscal year 20 20 (Example: a person filing a t imely claim in January 2011 would enter "2011-2012.")	PH: (707) 253-4467 FAX: (707) 253-6171
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)	FOR ASSESSOR'S USE ONLY
Γ	□ Received by
	of (county or city)
L	On
If you no longer seek an exemption at this location, check here \Box Sign and r	eturn this form to the Assessor. Date vacated:
NAME OF CLAIMANT	
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 1. Owner and operator: (check applicable boxes) Claimant is: Owner and operator Owner only Operator	DATE PROPERTY WAS FIRST USED BY CLAIMANT
and claims exemption on all Land Buildings and improvement	-
 2. Does the above institution qualify as a college or seminary of learning unde YES NO 3. Is the institution conducted as a non-profit entity? YES NO 	r the laws of the State of California?
4. Does the institution require for regular admission the completion of a four-year YES NO	ear high school course or its equivalent?
 Does the institution confer upon its graduates at least one academic or profes and sciences, or on a course of at least three years in professional studies, veterinary medicine, pharmacy, architecture, fine arts, commerce, or journal 	such as law, theology, education, medicine, dentistry, engineering,
YES NO	
6. Is the property for which the exemption is claimed used exclusively for the	purposes of education?
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.

	INCIDENTAL USE	PRIMARY USE	BUILDING & IMPROVEMENTS
□ LEASE □ OWN			
LEASE OWN			
□ LEASE □ OWN			
LEASE OWN			
LEASE OWN			

THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION

EF-264-AH-R13-0522-28000083-2 BOE-264-AH (P2) REV. 13 (05-22)				
8. Has any construction commenced and/or been co	mpleted on this parcel since 12:01 a.m., January 1 of last year?			
as defined in section 512 of the Internal Revenue YES NO If YES , a copy of the institution's most recent ta	exemption is claimed a student bookstore that generates unrelated business taxable income Code? x return filed with the Internal Revenue Service must accompany this claim. Property taxes, elated business taxable income to the bookstore's gross income, will be levied.			
10. Has any of the property listed above been used YES NO If YES , please explain:	for business purposes other than a student bookstore?			
11. If any business is operated by someone other the	an the college, attach a copy of the lease or other agreement. Please explain:			
	address of the owner and the type, make, model, and serial number of the property. If the cational purposes at the collegiate level, please state the other uses of the property. If real			
Taxation Code.	The to the lessee institution. If taxes paid by the lessor, see section 202.2 of the Revenue and DITIONAL REQUIRED DOCUMENTATION			
substituted.	equirements for admission. A current catalog showing the requirements may be			
degree.	bg, listing the degrees conferred upon the graduates and the requirements for each s (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 ADDRES	SS			
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

TITLE

DATE

NAME	OF PERSON	MAKING	CLAIM