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 claimant filing a timely claim in January 2017 would enter "2017-2018.")

LEGAL NAME OF ORGANIZATION		
MAILING ADDRESS (number and street)		
CITY, STATE, ZIP CODE		
WEBSITE ADDRESS (if any)	CORPORATE OR LLC ID NO. (if any)	FEIN/EIN
CHECK ANY OF THE FOLLOWING ITEMS THAT HAVE BEEN CHANGED WITHIN THE LAST		RGANIZATION NAME
	you do not have an OCC, have you filed a cla Yes No If No, see the instructions participation obtaining an OCC	im for an OCC with the Board? age for information regarding
PRIOR YEAR FILINGS Has the organization filed for the welfare exemption on any property in this county ir	n prior years? 🔲 Yes 🗔 No If Yes, sta	ate latest year filed:
1. IDENTIFICATION OF PROPERTY a. ADDRESS OF PROPERTY (number and street, including suite/unit number if applicable)		
CITY	ASSESSOR'S PARC	EL/ASSESSMENT NUMBER(S)
b. Is this a new location this year? Yes No. c. When was the pro	perty put to exempt use (MM/DD/YYYY))?
		e Possessory Interest
2. REAL PROPERTY. If claiming an exemption on real property, provide: a. Date property acquired (MM/DD/YYYY):		
b. Land. Area in acres or square feet: c. Building and Improveme	nts. Building number or name, number	of floors:
d. Use . Describe primary and incidental use of the property:	VUT	
e. Real property leased, rented, or used by others (since January 1 of the prior yers) is any portion of the real property identified under Section 1 used or operated property claimant?		organization other than the
Yes No If Yes , please submit BOE-267-O.		
 PERSONAL PROPERTY. If claiming an exemption on personal property, provid a. Description (type) of the property: 	e:	
b. Use . Describe primary and incidental use of the property:		
 c. Personal property owned by the claimant that is leased, rented, or used by othe Is any portion of the personal property identified under Section 1 used or opera Yes □ No If Yes, attach a description of the property, its use, the name or or agreement. 	ted by another party?	if any), and a copy of the lease

d. Equipment leased or rented from another person or organization (since January 1 of the prior year) Is any portion of the equipment or other property at the location identified under Section 1 leased, rented, or consigned from another person or organization?

Yes I Yes Attach a list of the equipment and other property, description of property, and name of whom you lease/rent the property from. Property so listed is not subject to the exemption, and will be assessed by the Assessor if owned by a taxable entity. If owned by a tax exempt organization, the property may be eligible for the welfare exemption.

4. TAXABLE POSSESSORY INTEREST. If claiming an exemption on a taxable possessory interest, attach a copy of the current lease agreement and provide: a. Name of the public owner (local, state, or federal agency) of the land, buildings, and/or improvements:

b. Description of the type of property that is leased from the public owner:

c. Use. Describe primary and incidental use of the property:





Shanna White **County Clerk-Recorder-Assessor** P.O. Box 1255 Weaverville, CA 96093 Phone: (530) 623-1257 Fax: (530) 623-8398 assessor@trinitycounty.org

BOE-267 (P2) RE 5. USE OF PR	=V. 16 (05-24)		
	OPERTY		
(1) Is any po	of a store, thrift shop,	•	the prior year) ate a store, thrift shop, or other facility that sells goods to members of the
	e 1		perated and (B) describe the type of goods sold:
(2) Is the pr	operty used as a thrift s	hop as part of a planned, formal reha	abilitation program?
., .] No If Yes , submit E		
b. Living Qua	rters (since January 1	of prior year)	
ls any portio ☐ Yes ☐	No If Yes, desc	ribe that portion. Submit documentation	uarters (other than low-income or elderly or handicapped housing)? on that the housing is incidental to and reasonably necessary for the exemp e associated with a rehabilitation program, submit BOE-267-R.
c. Low-Incom	•	fied under Section 1 used as low-inco	ome housina?
☐ Yes □		nit BOE-267-L if owned by a nonprofit	t organization or limited liability company; submit BOE-267-L1 if owned by a
-	landicapp <mark>ed Housing</mark>		
Is any portio ☐ Yes ☐	No If Yes , submincluding bu		v for the elderly or handicapped? es are provided or the property is financed by the federal government under, 6, or 811 of the Federal Public Laws. Submit documentation on the type of
	D BUSINESS TAXABI		
		is sought used for activities that prod IRC), and that is subject to the tax im	duce income that is "unrelated business taxable income," as defined in section posed by section 511 of the IRC?
🗌 Yes 🗌] No If <mark>Yes</mark> , attach	each of the following:	
frar 7. EXPANSIO	nchise taxation, and the		ation that is attributable to activities in the state and is exempt from income ization that is attributable to activities in the state.
Do you com			
8. FINANCIAL Claimant mu		operating statement (income and expe	enses) and balance sheet (assets and liabilities), which relate exclusively to
8. FINANCIAL Claimant mu the property	ust attach a copy of its	operating statement (income and exp n 1, for the calendar or fiscal year pre	enses) and balance sheet (assets and liabilities), which relate exclusively to
 FINANCIAL Claimant mu the property OTHER - EX Please check 	ust attach a copy of its r identified under Section XEMPT ACTIVITY ANE ck all boxes that are ap	operating statement (income and exp in 1, for the calendar or fiscal year pre O USE plicable:	eenses) and balance sheet (assets and liabilities), which relate exclusively to eceding the claim year.
 8. FINANCIAL Claimant mu the property 9. OTHER - EX Please chect Yes \[No 	ust attach a copy of its r identified under Section XEMPT ACTIVITY ANE ck all boxes that are ap The property is used t	operating statement (income and expo in 1, for the calendar or fiscal year pre D USE plicable: for the actual operation of the exempt	eenses) and balance sheet (assets and liabilities), which relate exclusively to eceding the claim year.
 8. FINANCIAL Claimant muthe property 9. OTHER - EX Please chect Yes \[] No 	ust attach a copy of its r identified under Section XEMPT ACTIVITY ANE of all boxes that are ap The property is used The property is used shareholder, member	operating statement (income and expo in 1, for the calendar or fiscal year pre D USE plicable: for the actual operation of the exempt or operated by the owner or by any c , employee, contributor, or bondholde	eenses) and balance sheet (assets and liabilities), which relate exclusively to eceding the claim year.
 8. FINANCIAL Claimant mu the property 9. OTHER - E) Please chect Yes \u2228 No Yes \u2228 No 	ust attach a copy of its of identified under Section KEMPT ACTIVITY AND Ck all boxes that are ap The property is used the property is used shareholder, member profits, payment of ex The property is used by	operating statement (income and expond n 1, for the calendar or fiscal year prese OUSE plicable: for the actual operation of the exempt or operated by the owner or by any construction, or bondholde cessive charges or compensations, or	eenses) and balance sheet (assets and liabilities), which relate exclusively to ecceding the claim year. It activity. The person or organization so as to benefit any officer, trustee, director, er of the owner or operator, or any other person, through the distribution of or the more advantageous pursuit of the business or profession. It for fraternal or lodge purposes, or for social club purposes except where
8. FINANCIAL Claimant mu the property 9. OTHER - E) Please cheo Yes No	ust attach a copy of its of identified under Section XEMPT ACTIVITY AND ck all boxes that are ap The property is used the property is used shareholder, member profits, payment of ex The property is used be such use is clearly inc	operating statement (income and expond n 1, for the calendar or fiscal year pre- DUSE plicable: for the actual operation of the exempt or operated by the owner or by any of , employee, contributor, or bondholde cessive charges or compensations, or by the owners, operators, or members idental to a primary religious, hospital	eenses) and balance sheet (assets and liabilities), which relate exclusively to ecceding the claim year. It activity. The person or organization so as to benefit any officer, trustee, director, er of the owner or operator, or any other person, through the distribution of or the more advantageous pursuit of the business or profession. It for fraternal or lodge purposes, or for social club purposes except where
8. FINANCIAL Claimant mu the property 9. OTHER - E) Please chec Yes No Yes No	ust attach a copy of its of identified under Section XEMPT ACTIVITY AND ck all boxes that are ap The property is used the property is used shareholder, member profits, payment of ex The property is used be such use is clearly inc	operating statement (income and expond n 1, for the calendar or fiscal year pre- DUSE plicable: for the actual operation of the exempt or operated by the owner or by any of , employee, contributor, or bondholde cessive charges or compensations, or by the owners, operators, or members idental to a primary religious, hospital	eenses) and balance sheet (assets and liabilities), which relate exclusively to ecceding the claim year. It activity. The activity of the owner or organization so as to benefit any officer, trustee, director, er of the owner or operator, or any other person, through the distribution of or the more advantageous pursuit of the business or profession. It is for fraternal or lodge purposes, or for social club purposes except where a scientific, or charitable purpose.
8. FINANCIAL Claimant mu the property 9. OTHER - E) Please chec Yes No Yes No	ust attach a copy of its of identified under Section XEMPT ACTIVITY ANE of all boxes that are apperdix the property is used in the property is used is shareholder, member profits, payment of ex The property is used be such use is clearly incomplete the section of the secti	operating statement (income and expond n 1, for the calendar or fiscal year pre- DUSE plicable: for the actual operation of the exempt or operated by the owner or by any of , employee, contributor, or bondholde cessive charges or compensations, or by the owners, operators, or members idental to a primary religious, hospital	eenses) and balance sheet (assets and liabilities), which relate exclusively to eceding the claim year. t activity. other person or organization so as to benefit any officer, trustee, director, er of the owner or operator, or any other person, through the distribution of or the more advantageous pursuit of the business or profession. s for fraternal or lodge purposes, or for social club purposes except where l, scientific, or charitable purpose. business hours for additional information?
8. FINANCIAL Claimant mu the property 9. OTHER - E) Please chec Yes No Yes No	ust attach a copy of its of identified under Section XEMPT ACTIVITY ANE of all boxes that are apperdix the property is used in the property is used is shareholder, member profits, payment of ex The property is used be such use is clearly incomplete the section of the secti	operating statement (income and expenden 1, for the calendar or fiscal year precedent 1, for the calendar or fiscal year precedent of the statement of the actual operation of the exempt or operated by the owner or by any or a series of the actual operation of the exempt or operated by the owner or by any or a series of the owner or by any or a series of the owner of the exempt of the owner of the exempt of the owner or by any or a series of the owner of the exempt of the owner of the owner or by any of the owners, operators, or members idental to a primary religious, hospital operation of the exempt of the owner or by any of the owner	eenses) and balance sheet (assets and liabilities), which relate exclusively to eceding the claim year.
8. FINANCIAL Claimant mu the property 9. OTHER - E2 Please chec Yes No Yes No Yes No NAME	ust attach a copy of its of identified under Section XEMPT ACTIVITY ANE Construction of the property is used to shareholder, member profits, payment of ex. The property is used to such use is clearly income Whom shareholder	operating statement (income and expond n 1, for the calendar or fiscal year pre- D USE plicable: for the actual operation of the exempt or operated by the owner or by any of , employee, contributor, or bondholde cessive charges or compensations, or of the owners, operators, or members idental to a primary religious, hospital Duld we contact during normal EMAIL ADDRESS CERTIF f perjury under the laws of the State	eenses) and balance sheet (assets and liabilities), which relate exclusively to eceding the claim year. t activity. other person or organization so as to benefit any officer, trustee, director, er of the owner or operator, or any other person, through the distribution of or the more advantageous pursuit of the business or profession. s for fraternal or lodge purposes, or for social club purposes except where l, scientific, or charitable purpose. business hours for additional information?
8. FINANCIAL Claimant mu the property 9. OTHER - E2 Please chec Yes No Yes No Yes No NAME	ust attach a copy of its of identified under Section XEMPT ACTIVITY ANE ck all boxes that are ap The property is used a The property is used a shareholder, member profits, payment of ex The property is used b such use is clearly inc Whom sha ONE	operating statement (income and expond n 1, for the calendar or fiscal year pre- D USE plicable: for the actual operation of the exempt or operated by the owner or by any of , employee, contributor, or bondholde cessive charges or compensations, or of the owners, operators, or members idental to a primary religious, hospital Duld we contact during normal EMAIL ADDRESS CERTIF f perjury under the laws of the State	eenses) and balance sheet (assets and liabilities), which relate exclusively to eceding the claim year. t activity. other person or organization so as to benefit any officer, trustee, director, er of the owner or operator, or any other person, through the distribution of or the more advantageous pursuit of the business or profession. a for fraternal or lodge purposes, or for social club purposes except where a scientific, or charitable purpose. business hours for additional information? TITLE FICATION e of California that the foregoing and all information hereon, including and
8. FINANCIAL Claimant mu the property 9. OTHER - E) Please chec Yes No Yes No Yes No NAME DAYTIME TELEPHO ()	ust attach a copy of its of identified under Section XEMPT ACTIVITY ANE of identified under Section XEMPT ACTIVITY ANE of the property is used in The property is used in The property is used in shareholder, member profits, payment of ex The property is used in such use is clearly income Whom sho ONE	operating statement (income and expond n 1, for the calendar or fiscal year pre- D USE plicable: for the actual operation of the exempt or operated by the owner or by any of , employee, contributor, or bondholde cessive charges or compensations, or of the owners, operators, or members idental to a primary religious, hospital Duld we contact during normal EMAIL ADDRESS CERTIF f perjury under the laws of the State	eenses) and balance sheet (assets and liabilities), which relate exclusively to eceding the claim year. t activity. other person or organization so as to benefit any officer, trustee, director, er of the owner or operator, or any other person, through the distribution of or the more advantageous pursuit of the business or profession. a for fraternal or lodge purposes, or for social club purposes except where a scientific, or charitable purpose. business hours for additional information? ITITLE FICATION e of California that the foregoing and all information hereon, including an ext, and complete to the best of my knowledge and belief.



INSTRUCTIONS FOR CLAIM FOR WELFARE EXEMPTION (FIRST FILING)

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)

FILING OF CLAIM

A claim for the Welfare Exemption must be filed with the Assessor by the organization owning the property or, in the case where the real property is leased from a public owner (any local, state, or federal government agency), by the lessee organization having a taxable possessory interest¹ in the real property. Real property includes land and improvements. An officer or duly authorized representative of the organization filing the claim must sign the claim form. A separate claim form must be completed and filed for each property location for which exemption is being sought.

The organization filing the claim must provide information on all uses of the property, including information on use by other organizations or persons. Each claim must contain supporting documents, including financial statements.

ORGANIZATIONAL CLEARANCE CERTIFICATE

An organization seeking the Welfare Exemption shall file with the State Board of Equalization (Board) a claim for an Organizational Clearance Certificate (OCC). The Board reviews each claim to determine whether the organization meets the requirements of Revenue and Taxation Code section 214² and issues a certificate to claimants that meet these requirements. The Assessor may not approve a property tax exemption claim until the claimant has been issued a valid OCC. However, your organization may file a claim for exemption with the Assessor, even if the claimant has not yet received the certificate from the Board. 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 OCC from the Board.

To request an OCC, nonprofit organizations must file BOE-277 and limited liability companies must file BOE-277-LLC. These forms are available on the Board's website (www.boe.ca.gov) or by contacting the Exemptions Section at 1-916-274-3430.

RECORDATION REQUIREMENT

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. (For real property acquired after the January 1 lien date, to receive full exemption, the claim must be filed within 90 days from the first day of the month following the month in which the property was acquired, or by February 15 of the following calendar year, whichever occurs earlier. Refer to section 271.) The combined tax, penalty and interest may not exceed \$250.

BOARD-PRESCRIBED FORMS REFERENCED ON THE CLAIM FORM AND IN THE INSTRUCTIONS

BOE-267-A, 20____ Claim For Welfare Exemption (Annual Filing)
BOE-267-H, Welfare Exemption Supplemental Affidavit, Housing – Elderly Or Handicapped Families
BOE-267-L, Welfare Exemption Supplemental Affidavit, Housing – Lower Income Households
BOE-267-L1, Welfare Exemption Supplemental Affidavit, Low-Income Housing Property Of Limited Partnership
BOE-267-O, Welfare Exemption Supplemental Affidavit, Organizations And Persons Using Claimant's Real Property
BOE-267-R, Welfare Exemption Supplemental Affidavit, Rehabilitation – Living Quarters
BOE-277, Claim For Organizational Clearance Certificate – Welfare Exemption
BOE-277-LLC, Claim For Organizational Clearance Certificate – Welfare Exemption

ADDITIONAL INFORMATION

In accordance with Revenue and Taxation Code section 254.5(b)(2), the assessor may institute an audit or verification of the property's use to determine whether both the owner and user of the property meet the requirements of Revenue and Taxation Code section 214.

² All further statutory references are to the Revenue and Taxation Code, unless otherwise specified.



¹ A taxable possessory interest is defined as the taxable interest held by a private possessor in publically owned real property. (See Assessors' Handbook, Section 510, Assessment of Taxable Possessory Interests (Dec. 2002), page 1.)

BOE-267 (P4) REV. 16 (05-24)

COMPLETION OF CLAIM FORM

All questions must be answered. Failure to answer all questions and provide requested information may result in denial of your claim. Use "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 being 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 2017 would enter "2017-2018"; a "2016-2017" entry on a claim filed in February 2017 would signify that a late claim was being filed for the preceding fiscal year.

Section 1. IDENTIFICATION OF PROPERTY

Identify the situs location (address and city), and Assessor's Parcel/Assessment Number of the property owned for which you are seeking exemption; when the property was put to exempt use; and check the appropriate box(es) to indicate type(s) of property. Claimant is responsible for completing sections 2 through 4 depending on which box(es) are checked under section 1(d). Refer to P3 for the definition of real property and taxable possessory interest. Personal property is defined as all property except real property, such as office furniture, computers, and equipment.

Section 2. REAL PROPERTY Complete only if "Real Property" was checked under Section 1(d).

- (a) If the exemption is being claimed for real property, enter the date on which the property was acquired.
- (b) Indicate the area and the unit of measurement used (acres or square feet).
- (c) List all buildings and improvements on the land, using additional sheets if necessary.
- (d) Describe the primary use which should qualify the property for exemption and the incidental use(s) of the property since January 1 of the prior year.
- (e) If Yes, submit BOE-267-O, to provide information on every user of your real property.

Section 3. PERSONAL PROPERTY Complete only if "Personal Property" was checked under section 1(d).

Describe the type of personal property, and the primary use and incidental use(s) of the property since January 1 of the prior year. If yes to (c) or (d), then provide requested information.

Section 4. TAXABLE POSSESSORY INTEREST Complete only if "Taxable Possessory Interest" was checked under section 1(d). Attach a copy of the current lease agreement, identify the public owner (local, state, or federal agency) of the publically owned land, buildings and/or improvements, and describe the type of property that is leased from the public owner.

Section 5. USE OF PROPERTY

- (a)(1) If 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.
- (a)(2) If Yes, submit BOE-267-R.
- (b) If 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 a statement as to 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, or mentally or physically disabled.) If living quarters are associated with a rehabilitation program, submit BOE-267-R.
- (c) If Yes, submit BOE-267-L if owned by a nonprofit organization or limited liability company; submit BOE-267-L1 if owned by a limited partnership.
- (d) If Yes, submit BOE-267-H, unless care or services are provided or the property is financed by the federal government under, including but not limited to, sections 202, 231, 236, or 811 of the Federal Public Laws. Submit documentation on the type of financing or care/services.

Section 6. UNRELATED BUSINESS TAXABLE INCOME

If Yes, provide the documents and other information requested.

Section 7. EXPANSION

If Yes, describe the type of investment contemplated and the reasons that make such expansion necessary.

Section 8. FINANCIAL STATEMENTS

Submit the financial statements reflecting the operation of the subject property. The income and expenses should include only those that result from operation of the property. 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 expense 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.

Section 9. OTHER – EXEMPT ACTIVITY AND USE

