

Property Tax Exemption Application

Board of Equalization 2380 Washington Blvd., Suite 320 Ogden, UT 84401-1456 boe@webercountyutah.gov (801) 399-8112

This application is for exemption from ad-valorem property tax, as enacted by the Utah Legislature (see UCA § 59-2-1101). Please answer all questions thoroughly. Failure to supply all the information may result in a denial of exemption. The Board of Equalization reserves the right to request additional information or require a representative of the property owner to appear in person and give sworn testimony regarding applicant's claim for exemption.

Please submit copies of the following documents with your application:

- A) Articles of Incorporation of the nonprofit entity
- B) Current bylaws and/or organization information
- C) Most recently filed tax returns or reports to the Internal Revenue Service (IRS) reflecting the use of the property (Not required if your organization is a church)
- D) Financial information related to use of the property (balance sheets, profit/loss, income statements, or any other applicable statements)
- E) Letter from the IRS acknowledging your exemption under section 501(c) of the Internal Revenue Code

Please return the application and other required documents to the address listed at the top of this page. If you have any questions, contact the Board of Equalization at boe@WeberCountyUtah.gov.

**There are two major qualifiers for property tax exemption. First, the property must be owned by the approved exempt organization. This means the organization has applied to the county and been approved as an exempt entity, which is the purpose of this application. Second, the property has to be used <u>exclusively</u> for exempt purposes. After the organization is approved, the Weber County Assessor's Office will review the property's use and make a decision on its qualification.

Office use only

Org ID # _

Year/Initial App _____



1.	Organization Name:
	Org. Physical Address:
	Org. Mailing Address:
	Contact Name:
	Contact Phone Number:
	Contact Email:
	Name of Property Owner:
	Address of Property Owner:
2.	Please identify the constitutionally defined category you qualify for exemption under:
	□ Religious
	□ Educational
	□ Charitable
	□ Other (Please explain)
3.	Purpose for which the non-profit entity is organized:

Your Organization (Continued)

- 4. What amount of net earnings or products did the use of your property create last year?
- 5. How much of the amount in #4 was used directly for charitable purposes? (Please explain in detail the nature of the direct charitable use)
- 6. Does the nonprofit entity provide a significant service to others without the immediate expectation of material award? (Please explain)
- 7. Are the beneficiaries of the charity unrestricted? If restricted, please explain how the restriction supports the entity's charitable objectives._____
- Does anyone receive compensation (wages, goods, services or other benefits) for services rendered with respect to the use of the property?
 Y or N If YES, please describe in detail.

For each person receiving compensation, please describe their relationship to the owners of the property. (Is s/he an officer, trustee, director, shareholder, lessor, member, employee or contributor?)

A. Persons or organizations benefitted:

B. The amounts of such benefits:

C. How these people or organizations were selected to be a recipient:

- 9. If the use of the property did not create profits or net earnings, but resulted in benefits to any person or organization, please explain:
- 10. If the property does not produce income, please describe in detail how the use of the property is supported. (Such as donations, grants, etc.):

SCHEDULE A- REAL PROPERTY (If any owned by the applying organization)

Parcel Number	Physical Address	Date Acquired	Date Nonprofit Use Began

1. Real Property Parcel Information (add additional pages as necessary):

- 2. Please supply a current photograph of each property.
- 3. Briefly describe all improvements on each property (such as buildings or other physical structures): A._____
 - B._____
- 4. Has the nonprofit use, activity, and function continued without interruption since the nonprofit use began? If not, please explain.

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- 5. Is this property used **exclusively** for nonprofit activities? If not, please describe all other uses and what portions of the property are used for nonprofit activities. (Add additional pages if necessary.)
- Do you rent out, or lease, any part of the property, buildings, or structures? Y N If Yes, please answer questions A-E.

A. Name and address of lessee or renter.

B. Describe the portion being rented or leased.

C. What do you receive as payment?

D. How is the amount of payment determined?

E. Do any shareholders, owners, or other members of the nonprofit benefit from any of the net earnings, products, or services received from the rental/lease of the property? (Please describe in detail)

SCHEDULE B - PERSONAL PROPERTY

1. Please complete the following table for all personal property owned and/or used by your organization for which exemption is requested. Be certain to check the box which best describes the property. This list should also include property that you rent or lease to another party. (Two examples are provided.)

Item	Date Acquired (MM/YR)	Acquisition Cost	Furniture and Trade Fixtures	Machinery & Equipment	Other Personal Property	Is This Property Rented/Leased? ** Y or N **
Computer	04/16	\$8,500		X		N
Chairs	12/13	\$800	X			Y

2. Please list all mobile personal property such as: motor vehicles, motorcycles, scooters, bikes, campers, motor homes, travel trailers, and recreational vehicles. (Two examples are provided.)

Year	Make	Model	Type of Vehicle	Vehicle I.D. Number (VIN #)
1965	Dodge	Caravan	Passenger	123AB45678CD90
2005	Yamaha	Bonneville	Street Motorcycle	<i>YD564852</i>

(Type of Vehicle can include: Passenger Vehicle, Small Motor Vehicle, Personal Watercraft, Other Trailer (Non Commercial), Off-Highway Recreational Vehicle, Street Motorcycle, Travel Trailer, Tent Trailer, Truck Camper, Boat, etc.)

**If any of the above personal property is rented or leased, please provide their contact information below: (Name, Address, Telephone Number)

I certify that all the information contained in this application is true and agree this information is submitted to the Weber County Board of Equalization to grant exempt status to the organization.

Signature:	Signature:
Print Name:	Print Name:
Title:	Title:
Date:	