

APPLICATION FOR TAX EXEMPTION REAL PROPERTY

Date of Application:	DEADLINE April 15, 2024
Name of Applicant Organization:	
Address of Property:	
Legal Description:	
Parcel Number:	
Date Property Was Acquired By Owner/O	Organization:
If Applicant Is NOT The Legal Owner , Ex	plain Relationship/Affiliation To Owner:
Property Being Claimed:	ncipal Activities/Uses by Applicant Organization On
	naire
➤ Articles of Incorporation / By-Lav Status	ws / Constitution / IRS Ruling of 501
For Your Request To Be Reviewed All Of Applicant Name (please print): Mailing Address: Phone Number: Applicant Signature	Email Address:
Date: Board of Equalization	Action: ACCEPT DENY Chairman Initials Chairman Initials



Board of Equalization - IC§63-602 Questionnaire

Complete the questions below. If a question is not applicable to your organization, please write "N/A" in the space provided. When complete, you may submit it along with any supplemental documentation you wish the Board of Equalization to take into consideration of your property tax exemption request. 1. Is any portion of the property for which you seek an exemption leased to or used by another person or \square NO entity other than the property owner? \square YES \square NO Will the property be used for business or commercial use? \square YES 3. If any portion of the property is leased to or used by another person, organization or business, for either non-profit or commercial purpose(s), please provide the following: What business or commercial purpose(s) occurs on the property? b. The total square footage of the property (structure) and total acreage. The total square footage of the property used for business or commercial purposes. d. The amount of revenue derived on an annual basis from such business or commercial use. The total number of days over the past year that the property was used for business or commercial purposes. f. If multiple people or organizations used a portion of the property for business or commercial purposes, please provide a schedule separately detailing the information requested in items a through e above for each such person or organization.

4.	Is your organization supported by donations? \square YES \square NO
5.	What is the total amount of donations received on an annual basis?
6.	What is the percent of the donations as compared to total revenue?
7.	Please list all sources of revenue for your organization?
8.	Does the income your organization receives produce a profit? \square YES \square NO
9.	What are your organizations revenues as compared to expenses?
10.	Are the recipients of your organizations revenue required to pay? \square YES \square NO
11.	What is the fee charged? Is it the same fee for all recipients?
12.	What if the recipient cannot pay for the services? Are services still provided?
	If your organization did not provide your service, would the recipients require government assistance? YES NO Does your organization receive money from federal, state or local government sources?
	☐ YES ☐ NO If so, how much as compared to total revenue? (Include any grant monies)
15.	Is the property used exclusively for non-profit educational purposes? \square YES \square NO
16.	If you provide educational services, please describe theses services in detail.
17.	How does the community at large benefit from your organization's services?