

# Application for Property Tax Exemption

Summit County Board of Equalization

UCA §59-2-1101 and 1102  
Form PT-020  
PT-020.ai Rev. 10/99

This application should be used to apply for exemption from ad valorem (value-based) property tax.

## Nonprofit Entity Information

Name of organization applying	EIN, SSN, or other tax ID number	
Address	Tax year	
City	State	Zip
Contact person	Telephone	

## Exemption Information

This property is exclusively used for (check one):

- Religious purposes       Charitable purposes       Educational purposes
- Other (specify) \_\_\_\_\_

Describe the purpose of this nonprofit organization:

Describe why this property should be exempt from ad valorem property taxes:

## Attachments Attach the following documentation

1. A certified copy of the Articles of Incorporation of the nonprofit entity.
2. A copy of current by-laws and/or other organizational information.
3. A copy of the 501(c)(3) certification issued by the IRS.
4. Completed schedules as follows:
  - Schedule A** – Real Property; one schedule for each parcel of real property under consideration.
  - Schedule B** – Personal Property used exclusively for religious, charitable, or educational purposes.
  - Schedule C** – Financial information related to the property under consideration; complete only applicable portions.

# Application for Exemption – Real Property Schedule A

UCA §59-2-1101 and 1102  
Form PT-020A  
PT-020a.ai Rev. 10/99

Complete a separate Schedule A for each parcel of real property under consideration

## Property Owner

Full name of the owner of record	EIN, SSN, or other tax ID number	
Address	Telephone	
City	State	Zip

## Property Information and Description

Property Location	Property parcel number
Brief description of parcel	Date the property was acquired
	Acreage: <input type="checkbox"/> Actual <input type="checkbox"/> Approximate

List separately and describe each building or physical structure on the property

## Use of Property

- Complete this first question separately for each building or structure, use additional sheets as necessary.
  - Building or structure \_\_\_\_\_
  - Activities or functions this building or structure is used for \_\_\_\_\_  
\_\_\_\_\_
  - Percentage of building or structure used for this purpose .....
  - Approximate hours per month building or structure is used for this purpose .....
  - Date use for this purpose began .....
- Have all activities/functions listed in 1 continued without interruption since first starting? \_\_\_ Yes \_\_\_ No  
If no, explain any interim or non-use: \_\_\_\_\_
- Is there any use of the property, buildings or structures other than described in 1 above? \_\_\_ Yes \_\_\_ No  
If yes, describe: \_\_\_\_\_
- Is all or part of the property, buildings or structures rented or leased? \_\_\_ Yes \_\_\_ No  
If yes, answer the following.
  - Name of person or entity renting or leasing the property \_\_\_\_\_
  - Describe the portion that is rented or leased .....
  - Amount of rent or other compensation received .....
  - How is the rent or compensation determined? .....

## Attachments Attach the following items

- A copy of the legal description of the real property under consideration.
- A current photograph of the real property under consideration.

# Application for Exemption - Personal Property Schedule B

UCA §59-2-1101 and 1102  
Form PT-020B  
PT-020b1 .ai Rev. 10/99

## Property Owner

Property owner	EIN, SSN, or other tax ID number	
Address	Telephone	
City	State	Zip

## Property Information and Description

Property Location	Personal property account number (if any)
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Briefly describe the personal property under consideration for exemption

List the original acquisition cost and year acquired.

	Year Acquired	Acquisition Cost
Furniture and fixtures .....		\$
Commercial and industrial equipment .....		\$
Mobile homes .....		\$
Other personal property .....		\$
Estimated current value for items with unknown acquisition cost .....		\$

List all motor vehicles under consideration for exemption, including passenger cars, trucks and vans; motorcycles; campers, motor homes, travel trailers and other RVs; boats and watercraft; aircraft; and medium or heavy duty trucks.

License Plate No.	Type of Vehicle	Year	Make	Model	VIN/HIN	Location

## Use of Property

- Is the personal property used at a given parcel of real property? \_\_\_ Yes \_\_\_ No  
 If yes, indicate the property parcel number or address: \_\_\_\_\_  
 If no, where is the property usually located? \_\_\_\_\_
- Describe in detail all activities and functions that the property is used for, and the date the use began.
- Have all activities and functions in 2 continued without interruption since the use began? \_\_\_ Yes \_\_\_ No  
 If no, explain any interim or non use: \_\_\_\_\_

(continued on reverse)



# Application for Exemption - Benefactors Schedule C

UCA §59-2-1101 and 1102  
Form PT-20C  
PT-020c1 .ai Rev. 9/00

## Property Owner

Name of organization applying	Property parcel or account number
Contact person	Telephone
Property location	

## Financial Information

1. Does the use of the property in any way create funds, revenue, products or services that are sold or given away? \_\_\_ Yes \_\_\_ No  
If yes, state the amount and describe in detail: \$ \_\_\_\_\_
  
2. If you answered Yes in question 1, what portion of funds, revenue, products or services:
  - a. Are used directly for the purposes for which exemption is claimed? ----- %  
Describe the individuals or organizations receiving benefits, and how they are selected:
  
  - b. Are used indirectly for the purposes for which exemption is claimed? ----- %  
Describe the individuals or organizations receiving benefits, and how they are selected:
  
  - c. Are given to any shareholder or individuals or are distributed from the use of the property ----- %  
Explain in detail:
  
3. Does anyone receive compensation in wages, goods, services or other benefits, for services rendered with respect to the property? \_\_\_ Yes \_\_\_ No  
If yes, attach the following information for each individual:
  - a. Total compensation received in detail, e.g., money, goods, living quarters, services or other benefits.
  - b. How the compensation is determined.
  - c. Explanation of the services performed, including duties and working hours.
  - d. Relationship of the individual to the owner, user or operator of the property, and whether the individual is a trustee, director, shareholder, lessor, member, employee or contributor of the owner.

(continued on reverse)

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**Attachments** Attach the following documentation

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1. Copies of any financial statements, income statements, profit and loss statements or other records that accurately reflect the use of the described property, including the source of all funds, the amount received from each source, and the use of such funds for the most recent fiscal year available.
2. All information requested in question 3, above.
3. If the use of the property did not create any funds, revenue, products or services that are sold or given away, but did result in a benefit to any individual or organization, attach detailed documentation indicating the following:
  - a. All individuals or organizations benefited.
  - b. The amount of benefit received by each.
  - c. How such individuals or organizations were selected.

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**Certification**

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I certify that all statements and information on this sheet are true and correct to the best of my knowledge, and that I will notify the Board of Equalization if any of the information should change. I further certify that I have authority to sign this document.

Name (printed)	Position or capacity
Signature <b>X</b>	Date signed

Please supply an email address as that is the preferred form of correspondence