

CITY OF LEXINGTON
Commissioner of the Revenue
P. O. Box 922
300 East Washington Street
Lexington, Virginia 24450
[540] 462-3701; fax [540] 463-4738

REAL PROPERTY AND/OR PERSONAL PROPERTY

TAX EXEMPTION INFORMATION SHEET/APPLICATION

Date Mailed: _____

All questions must be answered. If the question is, in fact, not applicable to your specific situation, place "N.A." in place of answers. The form must be fully completed, and signed. Failure to comply will result in the property not being considered for tax exempt status at this time. Please type or print and return the completed form within thirty (30) days of mailing date given above to the address at the top of this form.

Owner: _____

Address: _____

Present Value of Property Carried on Your Books

A. Description of Personal Property

Location of Personal Property: _____

1. Item: _____	Value: \$ _____
2. Item: _____	Value: \$ _____
3. Item: _____	Value: \$ _____
4. Item: _____	Value: \$ _____

(attach additional sheets if necessary)

Total: \$ _____

Taxes Due on Said Personal Property (Full Year): \$ _____

B. Description of Real Property

Map & Parcel #: _____

Location of Real Property: _____

Assessed Value of Land: _____	Value: \$ _____
Assessed Value of Improvements: _____	Value: \$ _____
Total Assessed Value of Real Property: _____	Total: \$ _____

(attach additional sheets if necessary)

Taxes Due on said Real Property (Full Year): \$ _____

1. Are you chartered or incorporated under the laws of the Commonwealth of Virginia?
 No By what section of the Constitution and Code of Virginia do you claim this exemption? _____
 Yes If Yes, give date: _____

2. For what purpose is the ownership group chartered or incorporated: _____

(Complete this section for each request)

3. For what purpose is the property being used? Be specific.
- a. Personal Property: _____

- b. Real Property: _____

4. Does your ownership group have an exemption under the U.S. Internal Revenue Code Section 501(c) so that gifts to your group are deductible by the donors?
- No
 Yes Provide a copy of the letter from IRS confirming status.

(Complete this section for each request)

5. Does any other individual, association, or corporation occupy or use any part of the premises?
- No
 Yes If Yes, give details: _____

(Complete this section for each request)

6. Is any income derived from the use of any portion of the property by other individuals or groups, whether considered as rent or reimbursement for necessary expenses for services incurred?
- No
 Yes

(Complete this section for each request)

7. a. Percentage of personal property that is currently exempt from taxes: ____%.
We ask that the exemption for personal property be ____% of the total assessed value.
- b. Percentage of real property that is currently exempt from taxes: ____%.
We ask that the exemption for real property be ____% of the total assessed value.

8. Attach to this affidavit your most recent financial statement of income and expenditures for a 12-month period, which statement will become a part of this affidavit. The attached financial statement is for the period from _____ to _____. The statement was prepared by:

- Attach a copy of your Constitution, Bylaws and the most recent filing with the IRS, if any. If not, then a copy of the calculations indicating that none needed to be filed.

9. Has a current annual alcoholic beverage license for serving alcoholic beverages been issued by the Alcoholic Beverage Control Board to your organization for use on such property?
- No
 Yes If so, please detail the pertinent information: _____

10. Please list the compensation paid for salaries or other compensation to any director or officer of your organization for the last fiscal year and list what services were provided for these salaries?
- _____

11. a. Does any part of the net earnings of your organization inure to the benefit of any individual?
 No
 Yes If so, please list the details: _____

b. What, if any, portion of the service provided by your organization, is generated by funds received from donations, contributions, or local, state, or federal grants? Please list the details: _____

(As used in this subsection, donations shall include the providing of personal services or the contribution of in-kind or other material services.)

12. What services does your organization provide for the common good of the public? _____

13. State whether a substantial part of your organization's activities involve carrying on propaganda or otherwise attempting to influence legislation, or whether your organization participates or intervenes in any political campaign on behalf of any candidate for public office. _____

14. Please state your organization's rule, regulating policy, or practice concerning discrimination on the basis of religious conviction, race, color, sex, or national origin. _____

15. Please list any other criteria, facts, and circumstances which may be of assistance to the City Council in determining whether your organization should be exempt from personal property and/or real estate taxation: _____

16. Contact Person: Name: _____
Title: _____
Address: _____
Telephone: (home) _____ (work) _____

17. I understand that pursuant to the Virginia Code Section 58.1-3651, an ordinance exempting property from taxation may only be adopted after holding a public hearing with respect thereto, at which citizens shall have an opportunity to be heard. I understand further that I will be responsible for the cost of the newspaper advertisement which is required to be published.

This form was prepared by _____, whose title with the organization is _____.

Signature