Application for Community Land Trust Exemption

Appraisal District's Name		Phone (area code and number)			
Address	City	County	State	Zip Code	
GENERAL INSTRUCTIONS: This application is for documentation required by the application.	use in claiming exemptio	ns pursuant to Tax Code S	ection 11.1827. You must fu	ırnish all information and	
FILING INSTRUCTIONS: You must furnish all inform whether the statutory qualifications for the exemptio district office in each county in which the property is contact information for appraisal district offices may	n have been met. This do s located. Do <u>not</u> file this	ocument and all supporting document with the Texas C	documentation must be fi	led with the appraisal	
EXEMPTION APPLICATIONS: You must file the coryear for which you are requesting an exemption.	mpleted application with	all required documentation	between Jan. 1 and no lat	er than April 30 of the	
If the chief appraiser grants the exemption, you do r writing if and when your qualification for this exempt				otify the chief appraiser in	
	OTHER IMPORTA	ANT INFORMATION			
Pursuant to Tax Code Section 11.45, after considerin from you. You must provide the additional informatio may extend the deadline for furnishing the additional	n within 30 days of the re	equest or the application is	denied. For good cause sl		
State the tax year for which you are seeking this exe	emption.				
Tax Year					
STEP 1: Provide Name and Mailing Address	of Organization and I	dentity of Person Prepa	ring Application		
Name of Organization			Phone (area code and number)		
Mailing Address	City	County	State	Zip Code	
Name of Person Preparing this Application	Title		Driver's License, Person Social Security Number		
If this application is for an exemption from ad valore organization with a federal tax identification number, of a driver's license number, personal identification of	, that number may be pro	vided here in lieu			

* Unless the applicant is a charitable organization with a federal tax identification number, the applicant's driver's license number, personal identification certificate number or social security account number is required. Pursuant to Tax Code Section 11.48(a), a driver's license number, personal identification certificate number or social security account number provided in an application for an exemption filed with a chief appraiser is confidential and not open to public inspection. The information may not be disclosed to anyone other than an employee of the appraisal office who appraises property, except as authorized by Tax Code Section 11.48(b). If the applicant is a charitable organization with a federal tax identification number, the applicant may provide the organization's federal tax identification number in lieu of a driver's license number, personal identification certificate number or social security account number.

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S	TEP 2: Provide Information About the Organization and Attach Documents		
1.	Is the organization named in STEP 1 a community land trust created or designated under Local Government Code Section 373B.002?	Yes	No
2.	Is the organization engaged primarily in public charitable functions?	Yes	No
	If yes, using an attachment, describe the organization's activities in a narrative. The narrative description of activities should be thorough, accurate and include date-specific references to the tax year for which the exemption is sought. You may also attach representative copies of newsletters, brochures or similar documents for supporting details to this narrative.		
3.	Does the organization perform one or more of the charitable functions specified by Tax Code Section 11.18(d)?	Yes	No
	If yes, identify the function(s) performed:		
	If yes is the organization organized as a nonprofit corporation as defined by the Texas Non-Profit Corporation Act?	Yes	No
4.	Does the organization operate in a way that does not result in accrual of distributable profits?	Yes	No
5.	Does the organization operate in a way that does not result in realization of private gain resulting from payment of compensation in excess of a reasonable allowance for salary or other compensation for services rendered?	Yes	No
6.	Does the organization operate in a way that does not result in realization of any other form of private gain?	Yes	No
7.	Does the organization use its assets in performing the organization's charitable functions or the charitable functions of another charitable organization?	Yes	No
8.	Does the organization by charter, bylaw or other regulation adopted by the organization to govern its affairs direct that on discontinuance of the organization by dissolution or otherwise the assets are to be transferred to this state, the United States or an educational, religious, charitable or other similar organization that is qualified as a charitable organization under Section 501(c)(3), Internal Revenue Code of 1986, as amended?	Yes	No
	Attach a copy of the charter, bylaws or other documents adopted by the organization which govern its affairs.		
9.	Does the organization engage exclusively in the sale or lease of housing as described by Tax Code Section 11.1827(b)(1)(B) and related activities?	Yes	No
	If no, are the other activities the development of low-income and moderate-income housing?	Yes	No
	Attach a description of activities that are not exclusively the sale or lease of housing and related activities.		
S	TEP 3: Provide Information Regarding Audit		
	rsuant to Tax Code Section 11.1827(e), property may not be exempted under Tax Code Section 11.1827 unless the community land dit prepared by an independent auditor. The audit must include:	l trust annua	ılly has an
	(1) a detailed report on the trust's sources and uses of funds; and		
	(2) any other information required by the governing body of the municipality or county that created or designated the trust under Local Government Code Section 373B.002.	r	
	t later than the 180th day after the last day of the community land trust's most recent fiscal year, the trust must deliver a copy of the Code Section 11.1827(e) to:	e audit requ	ired by
	(1) the governing body of the municipality or county or an entity designated by the governing body; and		
	(2) the chief appraiser of the appraisal district in which the property subject to the exemption is located.		
10.	Did the organization timely deliver the required audit to the governing body of the municipality or county or an entity designated by the governing body?	Yes	No
	If no, attach a statement explaining your answer.		
11.	Did the organization timely deliver the required audit to the chief appraiser of the appraisal district in which the property subject to the exemption is located?	Yes	No
	If no, attach a statement explaining your answer.	_	

STEP 4: Describe the Property for Which Exemption is Sought and Provide Property Specific Information

Attach one Schedule A (LAND) for EACH parcel of land.

Attach one Schedule B (HOUSING UNITS) listing ALL housing units sharing the same physical address.

Attach one Schedule C (REAL PROPERTY FOR ADMINISTRATION) listing ALL real property used in administration.

Attach one Schedule D (TANGIBLE PERSONAL PROPERTY FOR ADMINISTRATION) listing ALL tangible personal property used in administration.

STEP 5: Read, Sign and Date

By signing this application, you designate the property described in the attached Schedules A, B, C and D as the property against which the community land trust exemption may be claimed in this appraisal district.

By signing this application, you certify that the information provided in this application is true and correct.

print here ▶		
	On Behalf of (name of Property Owner)	Title
sign here ▶		
	Authorized Signature	Date

If you make a false statement on this application, you could be found guilty of a Class A misdemeanor or a state jail felony under Penal Code Section 37.10.

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Form 50-805

Schedule A: Description of Land

to your application for exemption. Physical Address of Land City State Zip Code County Legal Description of Land (if known) Date of Acquisition of the Property Appraisal District Account Number (if known) Yes No Does the organization own the land for the purpose of leasing the land and selling or leasing the housing units located Yes No 3. Is the organization offering to sell or lease or is leasing the property as provided by Local Government Code Chapter 373B? . . Yes No

Complete one Schedule A form for EACH parcel of land for which exemption is sought. If multiple schedules are required, attach all completed schedules

Yes

No

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Schedule B: Description of Housing Units

attach all completed schedules to your application for exemption. Physical Address of Housing Units City State Zip Code County Legal Description of Housing Units (if known) Date of Acquisition of the Property Appraisal District Account Number (if known) Yes No Are the housing units located on the land owned by the organization? No 3. Does the organization own the land for the purpose of leasing the land and selling or leasing the housing units located on the land as provided by Local Government Code Chapter 373B. Yes No

4. Is the organization offering to sell or lease or is leasing the property as provided by Local Government Code Chapter 373B? . .

Attach one Schedule B form listing ALL housing units sharing the same physical address for which exemption is sought. If multiple schedules are required,

Schedule C: Description of Real Property Used in Administration

Complete one Schedule C form for EACH	parcel of improved and unimproved	real property for which exempti	on is sought.		
Physical Address of Land	City	County	State	Zip Code	
Legal Description of Real Property (if known)					
Appraisal District Account Number (if known)					
1. Is the property owned by the organizat	tion?			Yes	_ \
2. Is the property owned and used by the or leasing of property?				Yes	N
3. Is this property used exclusively by the	organization?			Yes	_ N
If no, is the use by another person for active	vities incidental to the organization's	use that benefit the beneficiarie	es of the trust?	Yes	N
List all other individuals and organizati give the requested information for each		past year for activities that b	enefit the beneficiar	ies of the trust an	nd
NAME	DATES USED	ACTIVI	тү	RENT PAID, IF ANY	1

Schedule D: Description of Tangible Personal Property Used in Administration

List on this schedule all tangible personal property for which exemption is sought.

Appraisal District Account Number (if known)					
ITEM		LOCAT	ION (Physical Address)		
Is the personal property listed above					
construction, repair, sale or leasing of	f property?			Yes	No
2. Is this personal property used exclus	ively by the organization? .			Yes	No.
If no, is the use by another person for ac	tivities incidental to the orga	nization's use that benefit the I	peneficiaries of the trust?	Yes	No.
List all other individuals and organiza give the requested information for each		rty in the past year for activi	ties that benefit the beneficiari	es of the trus	t and
DESCRIPTION OF PROPERTY	NAME	DATES USED	ACTIVITY	RENT PAID, I	F ANY