

**OTC
988**

Revised 6-2014

State of Oklahoma
APPLICATION FOR AD VALOREM TAX EXEMPTION
FOR CHARITABLE AND NON PROFIT ENTITIES
_____ County

Tax Year
2015

PLEASE PRINT OR TYPE

EXEMPTION: All property of any charitable institution organized or chartered under the laws of this state as a nonprofit or charitable institution, provided the net income from such property is used exclusively within this state for charitable purposes and no part of such income inures to the benefit of any private stockholder, including property which is not leased or rented to any other than a governmental body, a charitable institution or a member of the general public who is authorized to be a tenant in property owned by a charitable institution under Section 501 (c) (3) of the Internal Revenue Code, or property used exclusively and directly for charitable purposes. Complete text, Ref. Title 68 O.S. 2887(8)(9).

NAME OF CHARITABLE ORGANIZATION:

Name: _____

Mailing Address: _____

Phone Number: (_____) _____ Email Address: _____

Name of Person
Preparing Application: _____ Title: _____

Phone Number: (_____) _____

IDENTIFICATION OF REAL AND PERSONAL PROPERTY:

Owner of Record: _____

Physical Address: _____

Legal Description: _____

Record of Deed: Date _____ Book _____ Page _____

Does the Internal Revenue Service recognize this organization as a tax-exempt? ☐ Yes ☐ No
If **yes**, attach a copy of letter from the Internal Revenue Service.

Is the organization chartered under the laws of the State of Oklahoma as a nonprofit organization? . ☐ Yes ☐ No
If **yes**, attach a copy of the articles or incorporation and bylaws.

Does the organization register annually with the Oklahoma Secretary of State's Office?..... ☐ Yes ☐ No
If **yes**, attach a copy of registration.

Property used exclusively as?..... ☐ Charitable ☐ Nonprofit

Does the Charitable Organization have personal property? ☐ Yes ☐ No
If **yes**, attach a list of personal property being claimed for exemption.

Is all personal property on the attached list owned by the organization ☐ Yes ☐ No
If **no**, please explain:

What provisions, if any, have been made to dispose of surplus assets of your organization?

Continue application on back

PROPERTY USAGE: You must provide a written explanation as a response to each question asked.

1. Explain exact usage of the real and or personal property being claimed exempt:

2. Explain exact usage of all income from the real and personal property being claimed exempt:

3. Does the facility applying for the exemption operate without profit or private advantage to its owners and the officials in charge?

4. Do the patrons of the facility applying for the exemption receive the same services and treatment irrespective of their ability to pay?

5. Are the same charges made to all patrons regardless of ability to pay?

PLEASE ATTACH A COPY OF ALL DOCUMENTS WHICH SUPPORT THIS APPLICATION FOR EXEMPTION. (Example: articles of incorporation, bylaws, resolutions, income-expense statements, rent rolls, deeds, contracts, leases, etc.)

Must provide a copy of IRS Section 501(c)(3) and your filing with Oklahoma Secretary of State.

Please provide the name of person who may be contacted if additional information is needed.

Name: _____ Title: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone Number: (_____) _____

AFFIDAVIT

I, _____ being duly sworn, upon oath, under penalty of perjury do hereby depose and say that I am (Title) _____, of _____ organization; that as such I am acquainted with the books, accounts, and affairs of said organization and know the foregoing statements to be true, correct and complete, and that all information requested herein has been fully and correctly given (68 O.S. § 2945 provides penalties for false oaths).

Signature: _____

Subscribed and sworn to before me this _____ day of _____, _____.

My commission expires: _____, _____.

_____, Notary Public

Notary Seal

ASSESSOR USE ONLY Application for Exemption: ☐ Approved ☐ Disapproved

Assessor/ Deputy: _____ Date: _____

Account Number: _____

School
District