

## 2024 Application For Real Property Tax Exemption – Jackson County, Missouri –

Name of the Organization:		
Contact Name:		
Mailing Address:		
City:	State:	Zip:
Office Phone:	Alternate Phone	::
E-mail Address:		
Situs Address (physical location of prop		
Parcel Identification Number:		
1. Type of organization ( <i>e.g.</i> , <i>church</i> , <i>se</i>	chool, civic, medical, fr	caternal, educational, etc.)
<ul> <li>2. Is the owner exempt from state and f</li> <li>( ) Yes, under IRS code 501(c)</li> <li>( ) No.</li> </ul>		
<ul> <li>3. Is the organization that is applying for ( ) Yes.</li> <li>( ) No, the legal deed holder is:</li> </ul>	-	-
4. For what activities is the property use <b>of this property only</b> . Do not give b "public use".) Attach additional shee	proad conclusions, such	
5. On what date did this use begin (liste	ed in 4. above)?	
6. What is the contemplated future use	of the property?	



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- 7. Is the owner or applicant an L.L.C.?
  - () Yes. Please respond to A-D below.
  - ( ) No.
    - A. Provide a list of your members.
    - B. Are all LLC members' non-profit organizations? ( ) Yes ( ) No
    - C. Does the State and Federal Government consider the owner/applicant a disregarded entity? ( ) Yes ( ) No
    - D. Does the LLC file federal tax form #8832? ( ) Yes ( ) No

8. Who are the people benefiting from or served by the use of the property?

- 9. Does the property generate any income (other than donations)?
  - () Yes. Please respond to A & B below.
  - ( ) No.

A. From what source is the income generated (*e.g. rentals, leases, fees for services*)? Please provide leases or agreements from all sources of income.

B. What is the income used for?

- 10. Is there any other organization or business using this property?
  - () Yes. Please give details on a separate sheet of paper including who uses the property and for what purpose.
  - ( ) No.
- 11. Is any part of the property used as a residence?
  - () Yes. Please respond to A-D below.
  - ( ) No.
    - A. Who uses the property as their residence?
    - B. Resident(s) connection with the organization.
    - C. Duties of the resident(s) in connection with the property.
    - D. Schedule of rents charged or financial arrangements for residency.



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- 12. Do you charge a fee for any of the services you provide?
  - () Yes. Please respond to A-D below.
  - ( ) No.
    - A. Provide your fee schedule including any discounts or sliding scales.
    - B. Provide a copy of your policy that is used to determine who receives services at a reduced rate.
    - C. What percentages of your services are provided to those who cannot personally pay? \_\_\_\_\_%
    - D. What percentages of your expenses are attributed to your charity/indigent services? \_\_\_\_\_%
- 13. Does your organization deny services or turn away anyone?
  - ( ) Yes. Provide the circumstances that determine the denial of services on a separate paper.
  - ( ) No.
- 14. Please provide all documents listed below, that apply to the applicants' organization.
  - A. Articles of Incorporation and all amendments.
  - B. Missouri non-profit corporation status from the Secretary of State.
  - C. Tax-exempt determination by the IRS.
  - D. The organization's constitution, regulations, or by-laws and all amendments.
  - E. A current list of all officers, directors, trustees, etc. of the organization.
  - F. The applicant's income and expense statement for the two most recent tax years.
  - G. Documentation supporting the use of the property as of January 1 of the current year.
  - H. A copy of advertisements, brochures, postings or other notifications of activities benefitting the community at large or to those receiving indigent services.
  - I. Supporting documentation that the applicant's contributions received are tax deductible.
  - \*\*\*If the applicant is an LLC please contact us for additional required documents\*\*\*



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COMPLETE AND RETURN TO:

Assessment@jacksongov.org OR ASSESSMENT DEPARTMENT ATTN: Exemptions 415 East 12<sup>th</sup> Street, Ste. 1M Kansas City, Missouri 64106-2752 (Any questions contact: 816-881-3483)

REFERENCE FOR EXEMPTIONS: SECTION 137.100 AND 137.101, RSMO. ARTICLE X, SECTION 6, MO CONST. AND APPLICABLE CASE LAW.

The undersigned declares that all of the statements an within their personal knowled	1 11		
Note: Pursuant to state statute 575.050 and 575.060 RSMO, making a false affidavit or a false declaration is a misdemeanor and subject to criminal punishment.			
Applicant or representative (printed):			
Applicant or representative signature:	Date:		
Title:			
Rev. 10/2021			