

**OTC 987**

Revised 11-2023

**State of Oklahoma  
Application for Ad Valorem Tax Exemption  
for Religious Entities**

**Tax Year  
2024**

**EXEMPTION:** All property used exclusively and directly for fraternal or religious purposes within this state. Ref. 68 OS 2887(7)

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

**It is impossible for this application to cover every provision addressed in the statutes related to exempt religious organizations. The assessor may contact you with additional questions depending on the answers provided herein.**

**REAL PROPERTY OWNER:                      Please Print or Type**

Property Owner Name: \_\_\_\_\_

Physical Address: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Contact Name: \_\_\_\_\_ Title: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

Legal Description: \_\_\_\_\_

Record of Deed: Date: \_\_\_\_\_ Document Number: \_\_\_\_\_ (or) Book/Page: \_\_\_\_\_

Approximately what percentage of the property is requested to be exempt? \_\_\_\_\_ Sq. Footage: \_\_\_\_\_

Are the Real Property Owner and the Religious Organization the same? .....  Yes  No

Are there currently other exemptions on this property?.....  Yes  No

If **Yes**, provide organization name(s):

\_\_\_\_\_ Sq. Footage: \_\_\_\_\_

\_\_\_\_\_ Sq. Footage: \_\_\_\_\_

\_\_\_\_\_ Sq. Footage: \_\_\_\_\_

**RELIGIOUS ORGANIZATION:**

Religious Organization Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Contact Name: \_\_\_\_\_ Title: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

Is the Religious Organization requesting an exemption for its business personal property? ....  Yes  No

If **Yes**, provide a listing of the personal property being claimed for exemption.

Is there other business personal property in use by the Religious Organization which is not being claimed for exemption?.....  Yes  No

If **Yes**, provide a listing of the personal property **not** being claimed for exemption.

**PROPERTY USAGE (RELIGIOUS ORGANIZATION):**

1. Describe the exact usage of the property being claimed exempt:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. Does the organization operate without profit or private advantage to its officials in charge? Explain:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**REAL PROPERTY OWNER AFFIDAVIT:**

I, \_\_\_\_\_ being duly sworn, upon oath, under penalty of perjury do hereby depose and say that I am (Title) \_\_\_\_\_, of \_\_\_\_\_ (Real Property Owner); that as such I am acquainted with the books, accounts, and affairs of the property owner and know the foregoing statements with respect to the ownership to be true, correct and complete, and that all information requested of the real property owner has been fully and correctly given (68 OS Sec. 2945 provides penalties for false oaths).

Signature: \_\_\_\_\_

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

My commission expires: \_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_, Notary Public

Notary Seal

**RELIGIOUS ORGANIZATION AFFIDAVIT:**

I, \_\_\_\_\_ being duly sworn, upon oath, under penalty of perjury do hereby depose and say that I am (Title) \_\_\_\_\_, of \_\_\_\_\_ (Religious Organization); that as such I am acquainted with the books, accounts, and affairs of the organization and know the foregoing statements with respect to the organization to be true, correct and complete, and that all information requested of the organization has been fully and correctly given (68 OS Sec. 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