This claim is filed for fiscal year 20 ____ — 20 ____

BOE-267-L2 (P1) REV 03 (05-21)

Butte County California

Diane Brown Butte County Assessor

25 County Center Dr Suite 100 Oroville, CA 95965-3382

(530)552-3800

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WELFARE EXEMPTION SUPPLEMENTAL AFFIDAVIT, HOUSING — LOWER INCOME HOUSEHOLDS — TENANT DATA

as necess	Address/Unit Number Address/Unit Number	No. of Perso Househol	ns in Id	f form BOE-267-L. Annual Household Income ION iii that the foregoing is the foregoing is that the foregoing is t	Maximum Allowable Rent That Can Be Charged for the Unit	Actual Rent Charged to the Tenant
	ary. Report information for each unit that was	No. of Perso	part B of	f form BOE-267-L. Annual Household	Maximum Allowable Rent That Can Be	Actual Rent Charged to
	ary. Report information for each unit that was	No. of Perso	part B of	f form BOE-267-L. Annual Household	Maximum Allowable Rent That Can Be	Actual Rent Charged to
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	ary. Report information for each unit that was	No. of Perso	part B of	f form BOE-267-L. Annual Household	Maximum Allowable	tach additional sheets Actual Rent
mavimum		No. of Persons in A		halow to provide the	required information Att	
	59.14 of the Revenue and Taxation Code prothe following information on the units occupied	d by lower income hor	useholds	for which exemption		
	Qualified Households					
SECTION	2. HOUSEHOLD INFORMATION					
City, County, Zip Code					Assessor's Parcel/Assessment Number(s)	
Address of	f Property (number and street)					
Name of Organization					Corporate ID or LLC Number	
		JIDENTII IOATION			Corporate ID or LLC	Numbor
SECTION	1. IDENTIFICATION OF APPLICANT AND		OF PRO	DEDTY		
a taxpaye must com	n 50053 of the Health and Safety Code. The r, with respect to a single property or multiplete this affidavit if you checked box C(3) 214(g)(1)(C).	ple properties, may	not exce	ed twenty million do	ollars (\$20,000,000) in a	assessed value. You
liability co certain lin	ompany, that does not receive government nit if 90 percent or more of the occupants of	t financing or receive the property are low	/e low-in /er incon	come housing tax one households whos	credits, may qualify for se rent does not exceed	r exemption up to a the rent prescribed
In the cas	se of a claim, for low-income rental housin	0,	and ope	erated by an eligible	nonprofit organizatio	n or eligible limited
	BOE-267-A, Claim for Welfare Exemption (A	0,				
	BOE-267, Claim for Welfare Exemption (First					

THIS DOCUMENT IS CONFIDENTIAL AND IS NOT SUBJECT TO PUBLIC DISCLOSURE



INSTRUCTIONS FOR FILING WELFARE EXEMPTION SUPPLEMENTAL AFFIDAVIT, HOUSING — LOWER INCOME HOUSEHOLDS — TENANT DATA

FILING OF AFFIDAVIT

This affidavit is required under the provisions of sections 214(g)(1)(C), 214.17, and 259.14 of the Revenue and Taxation Code and must be filed when seeking exemption on low-income housing property, owned and operated by a nonprofit organization or eligible limited liability company, that <u>does not</u> receive government financing or state/federal low-income housing tax credits. A separate affidavit must be filed for each location upon which you are seeking exemption under the provisions of section 214(g)(1)(C). This affidavit supplements the claim for Welfare Exemption and must be filed, for certain properties, with the County Assessor by February 15 to avoid a late filing penalty under section 270. If you indicated on supplemental affidavit form BOE-267-L that you seek exemption under the criteria of Revenue and Taxation code section 214(g)(1)(C), by checking box (C)(3) in SECTION 3 of that form, you must complete and file this form; failure to do so will result in denial of the exemption. In accordance with Revenue and Taxation Code section 259.14, the Assessor shall keep this information confidential.

FISCAL YEAR

The fiscal year for which an exemption is sought must be entered correctly. The proper fiscal year follows the lien date (12:01 a.m., January 1) as of which the taxable or exempt status of the property is determined. For example, a person filing a timely claim in February 2018 would enter "2018-2019" on line four of the claim; a "2017-2018" entry on a claim filed in February 2018 would signify that a late claim was being filed for the preceding fiscal year.

SECTION 1. Identification of Applicant and Property

Identify the name of the organization seeking exemption on the low-income housing property, corporate identification number or LLC number assigned by the California Secretary of State. Identify the location of the low-income housing property, the county in which the property is located, and the assessor's parcel number or assessment number of the property.

SECTION 2. Household Information

Provide the requested household information on all units occupied by lower income households for which the organization is seeking exemption. This listing must include all households for which exemption is sought in Section 4 of form BOE-267-L, Welfare Exemption Supplemental Affidavit, Housing—Lower Income Households.

