This claim is filed for fiscal year 20 \_\_\_\_ — 20 \_\_\_\_

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



# **Bob Buckner Colusa County Assessor**

547 Market St., Suite 101 Colusa, CA 95932 (530) 458-0450

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

s is a Supplemental Affidavit filed with				
☐ BOE-267, Claim for Welfare Exemption (Fire	st Filing)			
☐ BOE-267-A, Claim for Welfare Exemption (A	Annual Filing)			
the case of a claim, for low-income rental housibility company, that does not receive governmentain limit if 90 percent or more of the occupants of Section 50053 of the Health and Safety Code. The expayer, with respect to a single property or multist complete this affidavit if you checked box C(3) section 214(g)(1)(C).	nt financing or receive low f the property are lower inc e total exemption amount a iple properties, may not ex	income housing tax of come households whose llowed under Revenue acced twenty million de	credits, may qualify for se rent does not exceed e and Taxation Code sec ollars (\$20,000,000) in a	exemption up to the rent prescribe ction 214(g)(1)(C) ssessed value. Yo
CTION 1. IDENTIFICATION OF APPLICANT AN me of Organization	D IDENTIFICATION OF P	ROPERTY	Corporate ID or LLC N	lumber
lress of Property (number and street)				
County, Zip Code			Assessor's Parcel/Assessment Number(s	
List of Qualified Households  ction 259.14 of the Revenue and Taxation Code proporting the following information on the units occupie iximum rent that can be charged to the household, an	ed by lower income househo	lds for which exemption	is claimed: the actual ho	usehold income, t
ction 259.14 of the Revenue and Taxation Code pro orting the following information on the units occupie kimum rent that can be charged to the household, ar	ed by lower income househo and the actual rent. Use the ta	lds for which exemption ble below to provide the	is claimed: the actual ho	ousehold income, t
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# 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 does not 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.

