This claim is filed for fiscal year 20 ____ - 20 ___

BOE-267-L2 (P1) REV 02 (05-19)

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

Kristine Lee Kings County Assessor

1400 W. Lacey Blvd. Hanford, CA 93230 559-852-2486 Fax: 559-582-2794

This is a S	upplemental Affidavit filed with				
	BOE-267, Claim for Welfare Exemption (First Filing)				
	BOE-267-A, Claim for Welfare Exemption (Annual Filing)				
liability co certain lin by Section a taxpaye must com of section	se of a claim, for low-income rental housing ompany, that does not receive government find if 90 percent or more of the occupants of the notes of the Health and Safety Code. The total respect to a single property or multiple plete this affidavit if you checked box C(3) in \$1.214(g)(1)(C).	nancing or receive lower property are lower income all exemption amount a properties, may not ex Section 3 of form BOE-2	income housing tax of ome households whos llowed under Revenue ceed twenty million do 267-L indicating you an	credits, may qualify for se rent does not exceed and Taxation Code secondars (\$20,000,000) in a	exemption up to a the rent prescribed tion 214(g)(1)(C) to ssessed value. You
Name of C	ne of Organization			Corporate ID or LLC Number	
Address of	Property (number and street)				
City, Coun	ty, Zip Code				
A. List of Section 25 an affidavi income, th	2. HOUSEHOLD INFORMATION F Qualified Households 59.14 of the California Revenue and Taxation Country transfer maximum rent that can be charged to the househeets as necessary. Report information for each	occupied by lower incon usehold, and the actual in unit that was reported in	ne households for which rent. Use the table below a Section 4, part B of for	h exemption is claimed: to provide the required m BOE-267-L.	he actual household
	Address/Unit Number	No. of Persons in Household	Annual Household Income	Maximum Allowable Rent That Can Be Charged for the Unit	Actual Rent Charged to the Tenant
		CERTIFICA	_		
I certif	y (or declare) under penalty of perjury under the l any accompanying statements or docu	laws of the State of Califournents, is true, correct, a	ornia that the foregoing on the best of th	and all information contait t of my knowledge and be	ined herein, including elief.
NAME OF	CLAIMANT	TITI	_E		DATE

DAYTIME TELEPHONE

EMAIL ADDRESS

SIGNATURE OF CLAIMANT

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 and county in which the property is located.

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.

