This is a Supplemental Affidavit filed with

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

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

Kristine Lee Kings County Assessor

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

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

□В	OE-267, Claim for Welfare Exemption (First	Filing)				
□В	BOE-267-A, Claim for Welfare Exemption (Annual Filing)					
oility com tain limit i Section 5 axpayer, v ist comple section 21	of a claim, for low-income rental housing pany, that does not receive government if 90 percent or more of the occupants of the 0053 of the Health and Safety Code. The twith respect to a single property or multiplete this affidavit if you checked box C(3) in 14(g)(1)(C).	financing or receive low- he property are lower inco otal exemption amount al le properties, may not ex n Section 3 of form BOE-2	income housing tax of ome households whos llowed under Revenue ceed twenty million do 167-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 the rent prescribe ction 214(g)(1)(C) t ssessed value. Yo	
ne of Orga	of Organization			Corporate ID or LLC Number		
lress of Pr	roperty (number and street)					
, County, 2	punty, Zip Code				Assessor's Parcel/Assessment Number(s)	
CTION 2.	HOUSEHOLD INFORMATION					
List of Q	ualified Households					
orting the ximum rer	14 of the Revenue and Taxation Code provice following information on the units occupied on that can be charged to the household, and a Report information for each unit that was remarked. Address/Unit Number	by lower income household the actual rent. Use the tab	ds for which exemption ble below to provide the	is claimed: the actual horequired information. Attained: Maximum Allowable Rent That Can Be	ousehold income, the ach additional sheet Actual Rent Charged to	
				Charged for the Unit	the Tenant	
I certify (d	or declare) under penalty of perjury under the any accompanying statements or do	CERTIFICA e laws of the State of Califo cuments, is true, correct, a	ornia that the foregoing	and all information conta t of my knowledge and be	ined herein, includir elief.	
AME OF CLA	MMANT	ТІТІ	E		DATE	
IGNATURE (OF CLAIMANT	DAYTIME TELEP	HONE	EMAIL ADDRESS		
	THIS DOCUMENT IS CONFI	DENTIAL AND IS NO	T CUID IF CT TO D	LIBLIC DISCLOSUI		

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.

