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

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This is a Supplemental Affidavit filed with				
☐ BOE-267, Claim for Welfare Exemption (F	irst Filing)			
☐ BOE-267-A, Claim for Welfare Exemption	(Annual Filing)			
In the case of a claim, for low-income rental hous liability company, that does not receive governme certain limit if 90 percent or more of the occupants by Section 50053 of the Health and Safety Code. The ataxpayer, with respect to a single property or mumust complete this affidavit if you checked box C(3 of section 214(g)(1)(C).  SECTION 1. IDENTIFICATION OF APPLICANT A	ent financing or receive low of the property are lower inc ne total exemption amount a ltiple properties, may not ex 3) in 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 e se rent does not exceed the and Taxation Code sect ollars (\$20,000,000) in as	exemption up to a he rent prescribed ion 214(g)(1)(C) to sessed value. You
Name of Organization			Corporate ID or LLC Number	
Address of Property (number and street)				
City, County, Zip Code				
SECTION 2. HOUSEHOLD INFORMATION  A. List of Qualified Households				
	units occupied by lower incorne household, and the actual	ne households for which rent. Use the table belo	h exemption is claimed: th w to provide the required	e actual household
A. List of Qualified Households Section 259.14 of the California Revenue and Taxatian affidavit reporting the following information on the income, the maximum rent that can be charged to the additional sheets as necessary. Report information for	units occupied by lower incore household, and the actual each unit that was reported in	ne households for which ent. Use the table belo a Section 4, part B of for Annual Household	h exemption is claimed: the to provide the required m BOE-267-L.  Maximum Allowable Rent That Can Be	e actual household information. Attack Actual Rent Charged to
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TITLE

EMAIL ADDRESS

DAYTIME TELEPHONE

NAME OF CLAIMANT

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.

