This is a Supplemental Affidavit filed with

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

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

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

Xochitl Marina Camacho Monterey County Assessor

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	BOE-267, Claim for Welfare Exemption (First Fi	ling)			
	BOE-267-A, Claim for Welfare Exemption (Annual)	ual Filing)			
ability co ertain lin y Sectio taxpaye nust com f sectior	se of a claim, for low-income rental housing pompany, that does not receive government firmit if 90 percent or more of the occupants of the n 50053 of the Health and Safety Code. The totar, with respect to a single property or multiple applete this affidavit if you checked box C(3) in S 1214(g)(1)(C).	nancing or receive love property are lower in al exemption amount properties, may not e Section 3 of form BOE	v-income housing tax of come households whose allowed under Revenue xceed twenty million do -267-L indicating you an	credits, may qualify for se rent does not exceed and Taxation Code se ollars (\$20,000,000) in a	r exemption up to a the rent prescribed ction 214(g)(1)(C) to ssessed value. You
ame of Organization				Corporate ID or LLC Number	
ddress o	f Property (number and street)				
ity, Coun	County, Zip Code			Assessor's Parcel/Assessment Number(s)	
ECTION	I 2. HOUSEHOLD INFORMATION			1	
l ist of	f Qualified Households				
porting t aximum	59.14 of the Revenue and Taxation Code provide the following information on the units occupied by rent that can be charged to the household, and the sary. Report information for each unit that was reported to the household. Address/Unit Number	lower income househor e actual rent. Use the ta	olds for which exemption able below to provide the B of form BOE-267-L.	is claimed: the actual he	ousehold income, th
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eporting the properties of the	the following information on the units occupied by rent that can be charged to the household, and the sary. Report information for each unit that was report	No. of Persons in Household No. of Persons in Household CERTIFIC aws of the State of Califuments, is true, correct,	ATION ATION Fornia that the foregoing	is claimed: the actual he required information. Att	Actual Rent Charged to the Tenant

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.

