This claim is filed for fiscal year 20 — 20

This is a Supplemental Affidavit filed with

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

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

Peter Aldana Assessor-County Clerk-Recorder County of Riverside

DATE

EMAIL ADDRESS

PO Box 751 Riverside, CA 92502-0751 Phone: (951) 413-2890 www.rivcoacr.org

■ BOE-267, Claim for Welfare Exemption (First)	Filing)			
BOE-267-A, Claim for Welfare Exemption (An	nual Filing)			
In the case of a claim, for low-income rental housing inbility company, that does not receive government the certain limit if 90 percent or more of the occupants of the by Section 50053 of the Health and Safety Code. The to a taxpayer, with respect to a single property or multiple nust complete this affidavit if you checked box C(3) in of section 214(g)(1)(C).	financing or receive low ne property are lower inc otal exemption amount a le 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 ar	credits, may qualify for one credits, may qualify for one credits and Taxation Code section (\$20,000,000) in as	exemption up to a he rent prescribed tion 214(g)(1)(C) to sessed value. You
ame of Organization		Corporate ID or LLC Number		
address of Property (number and street)				
City, County, Zip Code			Assessor's Parcel/Assessment Number(s)	
A. List of Qualified Households Section 259.14 of the Revenue and Taxation Code provide properties the following information on the units occupied by the following the fo	by lower income househol	ds for which exemption	is claimed: the actual hou	sehold income, the
A. List of Qualified Households Section 259.14 of the Revenue and Taxation Code provide	by lower income househol the actual rent. Use the ta	ds for which exemption ble below to provide the	is claimed: the actual hourequired information. Attainment of the second	sehold income, the ch additional sheets Actual Rent Charged to
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THIS DOCUMENT IS CONFIDENTIAL AND IS NOT SUBJECT TO PUBLIC DISCLOSURE

TITLE

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 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.

