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

David Peets Alpine County Assessor/Recorder

50 Diamond Valley Rd. P.O. Box 155 Markleeville, CA 9612

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

	is filed for fiscal year 20 = 20					
This is a S	Supplemental Affidavit filed with					
	BOE-267, Claim for Welfare Exemption (First F	-iling)				
	BOE-267-A, Claim for Welfare Exemption (Ann	nual 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 f nit if 90 percent or more of the occupants of th n 50053 of the Health and Safety Code. The to r, with respect to a single property or multiple uplete this affidavit if you checked box C(3) in 214(g)(1)(C).	inancing or ne property a otal exemptic e properties, Section 3 of	receive low- re lower inco on amount al may not exc form BOE-2	income housing tax come households whos lowed under Revenue seed twenty million do 67-L indicating you are	redits, may qualify for e rent does not exceed and Taxation Code se llars (\$20,000,000) in a	r exemption up to a I the rent prescribed ction 214(g)(1)(C) to assessed value. You
Name of C	Organization				Corporate ID or LLC	Number
Address of	f Property (number and street)	Λ				7
City, Count	ty, Zip Code					
SECTION	2. HOUSEHOLD INFORMATION					
Section 25 an affidavi income, th	f Qualified Households 59.14 of the California Revenue and Taxation C it reporting the following information on the units ne maximum rent that can be charged to the ho sheets as necessary. Report information for each	s occu <mark>pie</mark> d by ousehold, and	/ lowe <mark>r i</mark> ncom I the <mark>ac</mark> tual r	e households for which ent. Use the table below	exemption is claimed: v to provide the require	the actual household
	Address/Unit Number		Persons in usehold	Annual Household Income	Maximum Allowable Rent That Can Be Charged for the Unit	Actual Rent Charged to the Tenant
						the lenant
				E!		the renant
			<u> </u>			the renant
						the renant
I certif	fy (or declare) under penalty of perjury under the any accompanying statements or doc	laws of the S	CERTIFICA State of Califo ue, correct, al	rnia that the foregoing a	nd all information conta of my knowledge and b	ained herein, including
	fy (or declare) under penalty of perjury under the any accompanying statements or doc	laws of the S	State of Califo	rnia that the foregoing a nd complete to the best	nd all information conta of my knowledge and b	ained herein, including
NAME OF	any accompanying statements or doc	laws of the Scuments, is tro	State of Califo ue, correct, a	rnia that the foregoing and complete to the best	nd all information conte of my knowledge and b	nined herein, including elief.

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 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.

