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

Gus	Kran	ner	
Cou	าty A	sses	sor

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Telephone: (925) 313-7400 http://www.cccounty.us/assessor

This is a Supplemental Affidavit filed with						
□ BOE-267, Claim for Welfare Exemption (First Fili	ing)					
BOE-267-A, Claim for Welfare Exemption (Annua	al Filing)					
In the case of a claim, for low-income rental housing p liability company, that does not receive government fincertain limit if 90 percent or more of the occupants of the by Section 50053 of the Health and Safety Code. The tota a taxpayer, with respect to a single property or multiple pmust complete this affidavit if you checked box C(3) in Sof section 214(g)(1)(C). SECTION 1. IDENTIFICATION OF APPLICANT AND I	ancing or property a al exemption properties ection 3 of	receive low- are lower inco on amount al , may not exc form BOE-2	income housing tax of the households whos lowed under Revenue seed twenty million do 67-L indicating you ar	ereditie rer and ollars e see	s, may qualify for it does not exceed Taxation Code sec (\$20,000,000) in as	exemption up to a the rent prescribed tion 214(g)(1)(C) to ssessed value. You der the provisions
Address of Property (number and street)	Λ					
City, County, Zip Code						
SECTION 2. HOUSEHOLD INFORMATION						
A. List of Qualified Households Section 259.14 of the California Revenue and Taxation Coo	de provide	- 45 -4				
an affidavit reporting the following information on the units of income, the maximum rent that can be charged to the hous additional sheets as necessary. Report information for each	occu <mark>pie</mark> d by seh <mark>old</mark> , and	y lowe <mark>r i</mark> ncom d the <mark>ac</mark> tual r	e households for which ent. Use the table belo	n exe w to	mption <mark>is</mark> claimed: t provide the required	he actual household
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an affidavit reporting the following information on the units of income, the maximum rent that can be charged to the house additional sheets as necessary. Report information for each Address/Unit Number Address/Unit Number	No. of Hou	y lower incomed the actual reas reported in Persons in usehold CERTIFICA State of Califor	e households for which ent. Use the table belo Section 4, part B of for Annual Household Income TION Tion that the foregoing and complete to the best	Max Re Cha	mption is claimed: ti provide the required DE-267-L. kimum Allowable ent That Can Be arged for the Unit	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 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.

