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

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

	201121 III COME HOCOLHOLDO	1210/1111 2/11/1
This claim	is filed for fiscal year 20 — 20	
This is a S	upplemental Affidavit filed with	
	BOE-267, Claim for Welfare Exemption (First Filing)	
	BOE-267-A, Claim for Welfare Exemption (Annual Fi	ling)

Josie Gonzales Assessor-Recorder-County Clerk

County of San Bernardino Assessor's Office 222 W. Hospitality Lane - 4th Floor San Bernardino, CA 92415-0311 www.sbcounty.gov/arc

Phone: (909) 387-8307 Toll Free: (877) 885-7654

This is a Supplemental Affidavit filed with				
☐ BOE-267, Claim for Welfare Exemption (First F	iling)			
☐ BOE-267-A, Claim for Welfare Exemption (Ann	ual Filing)			
In the case of a claim, for low-income rental housing liability company, that does not receive government fi certain limit if 90 percent or more of the occupants of the by Section 50053 of the Health and Safety Code. The total taxpayer, with respect to a single property or multiple must complete this affidavit if you checked box C(3) in sof section 214(g)(1)(C). SECTION 1. IDENTIFICATION OF APPLICANT AND II	nancing or receive lo e property are lower in tal exemption amount e properties, may not e Section 3 of form BOE	w-income housing tax cr ncome households whose allowed under Revenue a exceed twenty million dol E-267-L indicating you are	edits, may qualify for rent does not exceed and Taxation Code sec lars (\$20,000,000) in a	exemption up to a the rent prescribed ction 214(g)(1)(C) to ssessed value. You
Name of Organization			Corporate ID or LLC N	umber
Address of Property (number and street)	Λ			
City, County, Zip Code			Assessor's Parcel/Ass	essment Number(s)
SECTION 2. HOUSEHOLD INFORMATION	- 			
reporting the following information on the units occupied by maximum rent that can be charged to the household, and the as necessary. Report information for each unit that was report information for each unit that was rep	ne ac <mark>tua</mark> l rent. Use <mark>th</mark> e t	table below to provide the re B of form BOE-267-L.		
	140. 01 1 6130113 11			Actual Bont
	Household	Income	Rent That Can Be Charged for the Unit	Actual Rent Charged to the Tenant
	Household	Income	Rent That Can Be	Charged to
	Household	Income	Rent That Can Be	Charged to
	Household	Income	Rent That Can Be	Charged to
	Household	Income	Rent That Can Be	Charged to
	Household	Income	Rent That Can Be	Charged to
	Household	Income	Rent That Can Be	Charged to
	Household	Income	Rent That Can Be	Charged to
	Household	Income	Rent That Can Be	Charged to
	Household	Income	Rent That Can Be	Charged to
I certify (or declare) under penalty of perjury under the	CERTIFIC laws of the State of Ca.	CATION Iifornia that the foregoing an	Rent That Can Be Charged for the Unit	Charged to the Tenant
	CERTIFIC laws of the State of Cauments, is true, correct,	CATION Iifornia that the foregoing an	Rent That Can Be Charged for the Unit	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.

