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

## Joaquin Torres Assessor-Recorder

1 Dr. Carlton B. Goodlett Place City Hall - Room 190 San Francisco, CA 94102-4698

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

his claim is filed for fiscal year 20 — 20					
his is a Supplemental Affidavit filed with					
	t Filing)				
BOE-267-A, Claim for Welfare Exemption (An	nnual Filing)				
In the case of a claim, for low-income rental housing itability company, that does not receive government certain limit if 90 percent or more of the occupants of the toy Section 50053 of the Health and Safety Code. The total taxpayer, with respect to a single property or multipenust complete this affidavit if you checked box C(3) in fraction 214(g)(1)(C).  SECTION 1. IDENTIFICATION OF APPLICANT AND	financing or the property a total exempti- ple properties n Section 3 o	receive low are lower inc on amount a s, may not ex f form BOE-2	-income housing tax of ome households whose llowed under Revenue ceed 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	exemption up to a the rent prescribed ction 214(g)(1)(C) to assessed value. You
lame of Organization				Corporate ID or LLC	Number
address of Property (number and street)	Λ				<u> </u>
City, County, Zip Code				Assessor's Parcel/Ass	essment Number(s)
PECTION O HOUSEHOLD INFORMATION					
SECTION 2. HOUSEHOLD INFORMATION					
A. List of Qualified Households	ides that clain	ns on "qualifi	ed property" as describ	ed in section 214 17 sha	all include an affidavit
	by lower inco I the actual rer eported in Sec No. of	ome ho <mark>usehol</mark> nt. Use the ta	ds for which exemption ble below to provide the	is claimed: the actual he required information. Att  Maximum Allowable Rent That Can Be	ousehold income, the ach additional sheets  Actual Rent Charged to
A. List of Qualified Households Section 259.14 of the Revenue and Taxation Code provi eporting the following information on the units occupied maximum rent that can be charged to the household, and as necessary. Report information for each unit that was re	by lower inco I the actual rer eported in Sec No. of	ome househol nt. Use the ta ction 4, part E Persons in	ds for which exemption ble below to provide the s of form BOE-267-L.  Annual Household	is claimed: the actual he required information. Att	ousehold income, the ach additional sheets  Actual Rent
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A. List of Qualified Households Section 259.14 of the Revenue and Taxation Code proviet eporting the following information on the units occupied maximum rent that can be charged to the household, and as necessary. Report information for each unit that was remarked.  Address/Unit Number	by lower inco	CERTIFICA	ds for which exemption ble below to provide the s of form BOE-267-L.  Annual Household Income  ATION  Company to the foregoing and complete to the best	is claimed: the actual herequired 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 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.

