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

Larie Durham Calaveras County Assessor 891 Mountain Ranch Road

891 Mountain Ranch Road San Andreas, CA 95249 209.754.6356

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

This claim is filed for fiscal year 20 — 20				
This is a Supplemental Affidavit filed with				
☐ BOE-267, Claim for Welfare Exemption (First I	Filing)			
☐ BOE-267-A, Claim for Welfare Exemption (Ann	nual Filing)			
In the case of a claim, for low-income rental housing liability company, that does not receive government for 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 of section 214(g)(1)(C). SECTION 1. IDENTIFICATION OF APPLICANT AND I	inancing or receive lone property are lower in tal exemption amount e properties, may not e Section 3 of form BOE	w-income housing tax c acome households whos allowed under Revenue exceed twenty million do 3-267-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 the rent prescribed ction 214(g)(1)(C) to essessed value. You
Name of Organization			Corporate ID or LLC	Number
Address of Property (number and street)	Λ /			
City, County, Zip Code	IVIII		As <mark>sessor's Parcel/Ass</mark>	essment Number(s)
SECTION 2. HOUSEHOLD INFORMATION				
A. List of Qualified Households				
Section 259.14 of the Revenue and Taxation Code provious 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 re	by low <mark>er i</mark> ncome ho <mark>use</mark> h the ac <mark>tua</mark> l rent. Use the t	olds for which exemption able below to provide the	s <mark>cl</mark> aimed: t <mark>he</mark> actual ho	ousehold income, the
Address/Unit Number	No. of Persons ir Household	Annual Household Income	Maximum Allowable Rent That Can Be Charged for the Unit	Actual Rent Charged to the Tenant
	1			
	OFDTIFIC			
	CERTIFIC	CATION		
I certify (or declare) under penalty of perjury under the any accompanying statements or doc	laws of the State of Cal	ifornia that the foregoing a	nd all information conta of my knowledge and b	ined herein, including elief.
I certify (or declare) under penalty of perjury under the any accompanying statements or doc	laws of the State of Ca cuments, is true, correct,	ifornia that the foregoing a	nd all information conta of my knowledge and b	ined herein, including elief.
any accompanying statements or doc	laws of the State of Ca cuments, is true, correct,	ifornia that the foregoing a and complete to the best	nd all information conta of my knowledge and b	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 <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.

