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

DELAO

Jennifer Perry, Assessor County of Del Norte

981 H Street, Suite 120 Crescent City, CA 95531 Telephone: (707) 464-7200

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

liability company, that does not receive government financing or receive low-income housing tax credits, may qualify for exemption up to a certain limit if 90 percent or more of the occupants of the property are lower income households whose rent does not exceed the rent prescribed by Section 50053 of the Health and Safety Code. The total exemption amount allowed under Revenue and Taxation Code section 214(g)(1)(C) to a taxpayer, with respect to a single property or multiple properties, may not exceed twenty million dollars (\$20,000,000) in assessed value. You must complete this affidavit if you checked box C(3) in Section 3 of form BOE-267-L indicating you are seeking exemption under the provisions of section 214(g)(1)(C). SECTION 1. IDENTIFICATION OF APPLICANT AND IDENTIFICATION OF PROPERTY Name of Organization Corporate ID or LLC Number Address of Property (number and street) City, County, Zip Code Assessor's Parcel/Assessment Number(s) SECTION 2. HOUSEHOLD INFORMATION A. List of Qualified Households Section 259.14 of the Revenue and Taxation Code provides that claims on "qualified property" as described in section 214.17 shall include an affidavi reporting the following information on the units occupied by lower income households for which exemption is claimed: the actual household income, the maximum rent that can be charged to the household, and the actual rent. Use the table below to provide the required information. Attach additional sheets	This claim i	is filed for fiscal year 20 — 20								
BOE-287-A, Claim for Welfare Exemption (Annual Filing) In the case of a claim, for low-income rental housing property, owned and operated by an eligible nonprofit organization or eligible limiter liability company, that does not receive government financing or receive low-income housing tax credits, may qualify for exemption up to a creatian limit 199 percent or more of the occupants of the property are lower income housing tax credits, may qualify for exemption up to a tax payer, with respect to a single property or multiple properties, may not exceed twenty million odalras (52,00,00,000) in assessed value. Not making the standard in the provisions of section 514(g)(f)(c). SECTION 1. IDENTIFICATION OF APPLICANT AND IDENTIFICATION OF PROPERTY Name of Organization Corporate ID or LLC Number Address of Property (number and street) City, County, Zip Code Assessor's Parceli/Assessment Number(s) SECTION 2. HOUSEHOLD INFORMATION A. List of Qualified Households SECTION 2. HOUSEHOLD INFORMATION A. List of Qualified Households SECTION 3. HOUSEHOLD INFORMATION A. List of Qualified Households SECTION 4. HOUSEHOLD INFORMATION A. List of Qualified Households SECTION 5. HOUSEHOLD INFORMATION A. List of Qualified Households SECTION 6. HOUSEHOLD INFORMATION A. List of Qualified Households SECTION 6. HOUSEHOLD INFORMATION A. List of Qualified Households SECTION 8. HOUSEHOLD INFORMATION A. List of Qualified Household Income Internation on the units occupied by lower income households for which exemption is claimed: the actual household income, the maximum entit hat can be charged to the household and the actual rent. List the table below to provide the required information. Altach additional sheet as necessary. Report information for each unit that was reported in Section 4, part B of form BOE-267-1. Address/Unit Number No. of Persons in Annual Household Income Information contained herein, including any accompanying statements or documents, is true, correct, and complete to the best of my knowledge and	This is a Su	upplemental Affidavit filed with								
In the case of a claim, for low-income rental housing property, owned and operated by an eligible nonprofit organization or eligible limitec liability company, that does not receive government financing or receive low-income housing tax credits, may qualify for exemption up to extent in limit 199 percent or more of the occupants of the property are lower income housing tax credits, may qualify for exemption up to extential initial 199 percent or more of the occupants of the property are lower income housing tax credits, may qualify for exemption up to a taxpayer, with respect to a single property or multiple properties, may not exceed the venty million olders (\$20,000) in assessed valventy million of section 214(g)(1)(c). SECTION 1. IDENTIFICATION OF APPLICANT AND IDENTIFICATION OF PROPERTY Name of Organization Corporate ID or LLC Number Address of Property (number and street) City, County, Zip Code Assessor's Parcel/Assessment Number(s) SECTION 2. HOUSEHOLD INFORMATION A. List of Qualified Households Section 259.14 of the Revenue and Taxation Code provides that claims on "qualified property" as described in section 214.17 shall include an affidav propertify in the propertify the claims on the units occupied by lower income households for which exemption is claimed: the actual household income, the maximum rent that can be charged to the household, and the actual rent. Use the table telow to provide the required information. Attact additional sheet as necessary, Report information for each unit that was reported in Section 4, part 9 of mb mDC-257-1. Address/Unit Number No. of Persons in Household Annual Household Maximum Allowable Rent That Can Be Charged to the household, and the actual rent that can be Charged to the control of		BOE-267, Claim for Welfare Exemption (First Filing)								
Name of Organization Corporate ID or LLC Number Address of Property (number and street) City, County, Zip Code Assessor's Parcel/Assessment Number(s) SECTION 2. HOUSEHOLD INFORMATION A. List of Qualified Households Section 259,14 of the Revenue and Taxation Code provides that claims on "qualified property" as described in section 214.17 shall include an affidavireporting the following information on the units occupied by lower income households for which exemption is claimed: the actual household income, the maximum rent that can be charged to the household, and the actual rent. Use the table below to provide the required information. Attach additional sheet as necessary. Report information for each unit that was reported in Section 4, part B of form BDE-267-L. Address/Unit Number No. of Persons in Household Income Annual Household Maximum Allowable Rent That Can Be Charged for the Unit Charged for the Unit CERTIFICATION I certify (or declare) under penalty of perjury under the laws of the Sate of California that the foregoing and all information contained herein, including any accompanying statements or documents, is true, correct, and complete to the best of my knowledge and belief.		BOE-267-A, Claim for Welfare Exemption (Annual Filing)								
Address of Property (number and street) City, County, Zip Code Assessor's Parcel/Assessment Number(s) SECTION 2. HOUSEHOLD INFORMATION A. List of Qualified Households Section 259.14 of the Revenue and Taxation Code provides that claims on "qualified property" as described in section 214.17 shall include an affidavireporting the following information on the units occupied by lower income households for which exemption is claimed: the actual household income, the maximum rent that can be charged to the household, and the actual rent. Use the table below to provide the required information. Attach additional sheet as necessary. Report information for each unit that was reported in Section 4, part B of form BOE-267-L. Address/Unit Number No. of Persons in Household Income No. of Persons in Household Income Charged for the Unit Charged to the Tenant CERTIFICATION I certify (or declare) under penalty of perjury under the laws of the State of California that the foregoing and all information contained herein, including any accompanying statements or documents, is true, cornect, and complete to the best of my knowledge and belief.	liability co certain lim by Sectior a taxpayer must com	ompany, that does not receive government finct if 90 percent or more of the occupants of the 150053 of the Health and Safety Code. The tor, with respect to a single property or multiple plete this affidavit if you checked box C(3) in	inancing o e property tal exempt e propertie	r receive low are lower ind ion amount a s, may not ex	r-income housing tax of come households whos illowed under Revenue acced twenty million do	redi e rer and ollars	ts, may qualify for nt does not exceed Taxation Code se s (\$20,000,000) in a	r exemption up to a the rent prescribed ction 214(g)(1)(C) to essessed value. You		
Address of Property (number and street) City, County, Zip Code Assessor's Parcel/Assessment Number(s) SECTION 2. HOUSEHOLD INFORMATION A. List of Qualified Households Section 259.14 of the Revenue and Taxation Code provides that claims on "qualified property" as described in section 214.17 shall include an affidav reporting the following information on the units occupied by lower income households for which exemption is claimed: the actual household income, the maximum rent that can be charged to the household, and the actual rent. Use the table below to provide the required information. Attach additional sheet as necessary, Report information for each unit that was reported in Section 4, part B of form BOE-267-L. Address/Unit Number No. of Persons in Household Income No. of Persons in Household Income Charged for the Unit Charged to the Tenant CERTIFICATION I certify (or declare) under penalty of perjury under the laws of the State of California that the foregoing and all information contained herein, including any accompanying statements or documents, is true, correct, and complete to the best of my knowledge and belief.	SECTION	1. IDENTIFICATION OF APPLICANT AND I	DENTIFIC	ATION OF P	ROPERTY					
SECTION 2. HOUSEHOLD INFORMATION A. List of Qualified Households Section 259,14 of the Revenue and Taxation Code provides that claims on "qualified property" as described in section 214.17 shall include an affidavi reporting the following information on the units occupied by lower income households for which exemption is claimed: the actual household income, the maximum rent that can be charged to the household, and the actual rent. Use the table below to provide the required information. Attach additional sheets as necessary. Report information for each unit that was reported in Section 4, part B of form BOE-267-L. Address/Unit Number No. of Persons in Household No. of Persons in Household Income Annual Household Maximum Allowable Rent That Can Be Charged for the Unit Charged to the Tenant Certify (or declare) under penalty of perjury under the laws of the State of California that the foregoing and all information contained herein, including any accompanying statements or documents, is true, correct, and complete to the best of my knowledge and belief.	Name of Organization Corporate ID o							Number		
SECTION 2. HOUSEHOLD INFORMATION A. List of Qualified Households Section 259.14 of the Revenue and Taxation Code provides that claims on "qualified property" as described in section 214.17 shall include an affidavi reporting the following information on the units occupied by lower income households for which exemption is claimed: the actual household income, the maximum rent that can be charged to the household, and the actual rent. Use the table below to provide the required information. Attach additional sheets as necessary. Report information for each unit that was reported in Section 4, part B of form BOE-267-L. Address/Unit Number No. of Persons in Household Income Annual Household Maximum Allowable Rent That Can Be Charged for the Unit Charged for the Unit Charged for the Unit CERTIFICATION I certify (or declare) under penalty of perjury under the laws of the State of California that the foregoing and all information contained herein, including any accompanying statements or documents, is true, correct, and complete to the best of my knowledge and belief.	Address of	Property (number and street)								
A. List of Qualified Households Section 259.14 of the Revenue and Taxation Code provides that claims on "qualified property" as described in section 214.17 shall include an affidavi reporting the following information on the units occupied by lower income households for which exemption is claimed: the actual household income, the maximum rent that can be charged to the household, and the actual rent. Use the table below to provide the required information. Attach additional sheet as necessary. Report information for each unit that was reported in Section 4, part B of form BOE-267-L. Address/Unit Number No. of Persons in Household Income Annual Household Income Maximum Allowable Rent That Can Be Charged for the Unit Charged to the Tenant Charged to the Tenant CERTIFICATION I certify (or declare) under penalty of penjury under the laws of the State of California that the foregoing and all information contained herein, including any accompanying statements or documents, is true, correct, and complete to the best of my knowledge and belief.	City, County, Zip Code Assessor's Parcel/A							sessment Number(s)		
CERTIFICATION I certify (or declare) under penalty of perjury under the laws of the State of California that the foregoing and all information contained herein, including any accompanying statements or documents, is true, correct, and complete to the best of my knowledge and belief. NAME OF CLAIMANT TITLE DATE		essary. Report information for each unit that was reported in Section 4, part B of form BOE-267-L. Address/Unit Number No. of Persons in Annual Househol					Maximum Allowable Actual Rent			
I certify (or declare) under penalty of perjury under the laws of the State of California that the foregoing and all information contained herein, including any accompanying statements or documents, is true, correct, and complete to the best of my knowledge and belief. NAME OF CLAIMANT TITLE DATE						Cna	arged for the Unit	the lenant		
I certify (or declare) under penalty of perjury under the laws of the State of California that the foregoing and all information contained herein, including any accompanying statements or documents, is true, correct, and complete to the best of my knowledge and belief. NAME OF CLAIMANT TITLE DATE										
I certify (or declare) under penalty of perjury under the laws of the State of California that the foregoing and all information contained herein, including any accompanying statements or documents, is true, correct, and complete to the best of my knowledge and belief. NAME OF CLAIMANT TITLE DATE										
any accompanying statements or documents, is true, correct, and complete to the best of my knowledge and belief. NAME OF CLAIMANT TITLE DATE	I certify	y (or declare) under penaltv of periurv under the	laws of the	State of Calif	ornia that the foregoing	and a	all information conta	ined herein. includina		
		any accompanying statements or doc	uments, is	true, correct, a	and complete to the best	of m	y knowledge and b	elief.		
SIGNATURE OF CLAIMANT DAYTIME TELEPHONE () EMAIL ADDRESS	NAME OF (CLAIMANT		TIT	IIILE			DATE		
	SIGNATUR	IGNATURE OF CLAIMANT			PHONE		EMAIL ADDRESS			

THIS DOCUMENT IS CONFIDENTIAL AND IS NOT SUBJECT TO PUBLIC DISCLOSURE



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.

