This is a Supplemental Affidavit filed with

This claim is filed for fiscal year 20 \_\_\_\_ — 20 \_\_\_\_

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

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

COUNTY OF ALAMEDA PHONG LA, ASSESSOR

1221 Oak St., Rm 145 Oakland, Ca. 94612-4288 (510) 272-3770 Fax (510) 272-3803 www.acgov.org/assessor

	ling)				
☐ BOE-267-A, Claim for Welfare Exemption (Annu	ıal Filing)				
In the case of a claim, for low-income rental housing plability company, that does not receive government fir 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).	nancing o property al exempt propertie	r receive low are lower inc ion amount a s, may not ex	income housing tax of ome households whos llowed under Revenue ceed twenty million do	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
ECTION 1. IDENTIFICATION OF APPLICANT AND ID	ENTIFIC	ATION OF P	ROPERTY		
me of Organization				Corporate ID or LLC Number	
ddress of Property (number and street)					
y, 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 provide reporting the following information on the units occupied by maximum rent that can be charged to the household, and the secessary. Report information for each unit that was reported to the control of the c	lower income actual recorded in Se	ome househol ent. Use the tal ection 4, part E	ds for which exemption ble below to provide the sof form BOE-267-L.	is claimed: the actual he required information. Att	ousehold income, the ach additional sheets
Address/Unit Number		f Persons in ousehold	Annual Household Income	Maximum Allowable Rent That Can Be Charged for the Unit	Actual Rent Charged to the Tenant
I certify (or declare) under penalty of perjury under the le	aws of the	CERTIFICA State of Califo	ornia that the foregoing	and all information conta	ined herein, including
I certify (or declare) under penalty of perjury under the lany accompanying statements or docu	aws of the	State of Califo	ornia that the foregoing and complete to the best	and all information conta	ined herein, including 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.

