BOE-267-L2 (P1) REV 02 (05-19)

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

Steve J. Bestolarides **Assessor-Recorder-County Clerk** 

https://www.sjgov.org/department/assessor

San Joaquin County 44 N San Joaquin Street Suite 230 Stockton, CA 95202-3273 Exemptions: (209) 468-2646

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This claim is filed for fiscal year 20 — 20					
This is a Su	upplemental Affidavit filed with				
	BOE-267, Claim for Welfare Exemption (First Filing)				
	BOE-267-A. Claim for Welfare Exemption (Annual Filing)				

☐ BOE-267-A, Claim for Welfare Exemption (Annua	l Filing)			
In the case of a claim, for low-income rental housing pr liability company, that does not receive government fina certain limit if 90 percent or more of the occupants of the pby Section 50053 of the Health and Safety Code. The total a taxpayer, with respect to a single property or multiple property complete this affidavit if you checked box $C(3)$ in Se of section 214(g)(1)(C).	ncing or receive low- property are lower inco exemption amount al roperties, may not exc	income housing tax of ome households whos lowed under Revenue ceed twenty million do	redits, may qualify for e rent does not exceed t and Taxation Code sect ollars (\$20,000,000) in as	exemption up to a the rent prescribed tion 214(g)(1)(C) to sessed value. You
SECTION 1. IDENTIFICATION OF APPLICANT AND IDE	ENTIFICATION OF PR	OPERTY		
Name of Organization			Corporate ID or LLC Number	
Address of Property (number and street)				
City, County, Zip Code				
SECTION 2. HOUSEHOLD INFORMATION				
A. List of Qualified Households				
Section 259.14 of the California Revenue and Taxation Cod an affidavit reporting the following information on the units of income, the maximum rent that can be charged to the house additional sheets as necessary. Report information for each units of the control	ccupied by lower income hold, and the actual re	ne households for which ent. Use the table belo	n exemption is claimed: the w to provide the required	ne actual household
Address/Unit Number	No. of Persons in Household	Annual Household Income	Maximum Allowable Rent That Can Be Charged for the Unit	Actual Rent 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.

,,,,,,,,,,,								
NAME OF CLAIMANT		TITLE		DATE				
SIGNATURE OF CLAIMANT	DAYTIME T	ELEPHONE	EMAIL ADDRESS					
<b>&gt;</b>	( )							

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 and county in which the property is located.

## **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.

