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

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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

Lawrence E. Stone **Santa Clara County Assessor**

Exemptions Unit West Tasman Campus 130 W Tasman Drive San Jose, CA 95134 Ph: (408) 299-6460 exemptions@asr.sccgov.org www.sccassessor.org

BOE-267, Claim for Welfare Exemption BOE-267-A, Claim for Welfare Exemption In the case of a claim, for low-income rental he liability company, that does not receive govern certain limit if 90 percent or more of the occupan by Section 50053 of the Health and Safety Code. a taxpayer, with respect to a single property or respect to the officient if you checked box	on (Annual Filing) ousing property, owned and oment financing or receive low ts of the property are lower inc The total exemption amount a nultiple properties, may not ex	r-income housing tax of come households whose allowed under Revenue acceed twenty million de	credits, may qualify for se rent does not exceed and Taxation Code secondars (\$20,000,000) in a	exemption up to a the rent prescribed ction 214(g)(1)(C) to ssessed value. You
must complete this affidavit if you checked box of section 214(g)(1)(C).	C(3) In Section 3 of form BOE-	267-L indicating you a	e seeking exemption u	naer tne provisions
SECTION 1. IDENTIFICATION OF APPLICANT	AND IDENTIFICATION OF P	ROPERTY		
me of Organization			Corporate ID or LLC Number	
Address of Property (number and street)				
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 reporting the following information on the units occ maximum rent that can be charged to the household as necessary. Report information for each unit that	upied by lower income househod, and the actual rent. Use the ta	lds for which exemption ble below to provide the	is claimed: the actual ho	ousehold income, the
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
I certify (or declare) under penalty of perjury un	CERTIFICA der the laws of the State of Calif s or documents, is true, correct, a	ornia that the foregoing	and all information contai	ined herein, including
NAME OF CLAIMANT		LE	. o. my knowedge and be	DATE
SIGNATURE OF CLAIMANT	DAYTIME TELE	PHONE	EMAIL ADDRESS	

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.

