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

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



# Don H. Gaekle Stanislaus County Assessor

1010 Tenth Street, Suite 2400 Modesto, CA 95354-0863

Phone: (209) 525-6461 • Fax: (209) 525-6586

www.stancounty.com/assessor

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

his is a Supplemental Affidavit filed with					
☐ BOE-267, Claim for Welfare Exemption (First	Filing)				
☐ BOE-267-A, Claim for Welfare Exemption (Ar	nnual Filing)				
n the case of a claim, for low-income rental housing ability company, that does not receive government ertain limit if 90 percent or more of the occupants of ty Section 50053 of the Health and Safety Code. The taxpayer, with respect to a single property or multipnust complete this affidavit if you checked box C(3) in f section 214(g)(1)(C).	financing or receive low- the property are lower inco total exemption amount al the properties, may not ex	income housing tax of ome households whos lowed under Revenue ceed twenty million do	credits, may qualify for se rent does not exceed and Taxation Code second blars (\$20,000,000) in a	r exemption up to a the rent prescribed ction 214(g)(1)(C) to essessed value. You	
ECTION 1. IDENTIFICATION OF APPLICANT AND	IDENTIFICATION OF PR	ROPERTY	Composets ID on LLCA	humb an	
e of Organization			Corporate ID or LLC Number		
Address of Property (number and street)					
City, County, Zip Code	unty, Zip Code			Assessor's Parcel/Assessment Number(s)	
	by lower income household	ds for which exemption	is claimed: the actual ho		
eporting the following information on the units occupied naximum rent that can be charged to the household, and as necessary. Report information for each unit that was re	by lower income household the actual rent. Use the tab	ds for which exemption ble below to provide the	is claimed: the actual ho	ousehold income, the	
naximum rent that can be charged to the household, and as necessary. Report information for each unit that was re	by lower income household the actual rent. Use the table eported in Section 4, part B	ds for which exemption ble below to provide the of form BOE-267-L.  Annual Household	is claimed: the actual he required information. Att  Maximum Allowable Rent That Can Be	ousehold income, the ach additional sheets  Actual Rent Charged to	
naximum rent that can be charged to the household, and as necessary. Report information for each unit that was re	by lower income household the actual rent. Use the table eported in Section 4, part B	ds for which exemption ble below to provide the of form BOE-267-L.  Annual Household	is claimed: the actual he required information. Att  Maximum Allowable Rent That Can Be	ousehold income, the ach additional sheets  Actual Rent Charged to	
maximum rent that can be charged to the household, and as necessary. Report information for each unit that was re	by lower income household the actual rent. Use the table eported in Section 4, part B	ds for which exemption ble below to provide the of form BOE-267-L.  Annual Household	is claimed: the actual he required information. Att  Maximum Allowable Rent That Can Be	ousehold income, the ach additional sheets  Actual Rent Charged to	
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naximum rent that can be charged to the household, and is necessary. Report information for each unit that was re	by lower income household the actual rent. Use the take ported in Section 4, part B  No. of Persons in Household  CERTIFICA e laws of the State of Califor	ds for which exemption ble below to provide the of form BOE-267-L.  Annual Household Income  TION  Trion that the foregoing a	is claimed: the actual he required information. Att  Maximum Allowable Rent That Can Be Charged for the Unit	Actual Rent Charged to the Tenant	
naximum rent that can be charged to the household, and as necessary. Report information for each unit that was re  Address/Unit Number  I certify (or declare) under penalty of perjury under the	by lower income household the actual rent. Use the take ported in Section 4, part B  No. of Persons in Household  CERTIFICA e laws of the State of Califor	ds for which exemption ble below to provide the of form BOE-267-L.  Annual Household Income  TION  Trion that the foregoing and complete to the best	is claimed: the actual he required information. Att  Maximum Allowable Rent That Can Be Charged for the Unit	Actual Rent Charged to the Tenant	

# 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.

