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

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

**County of Inyo** Dave Stottlemyre, Assessor

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TIOUSING — LOWER INCOME TIOUSE TO LIVE THE TENANT BATE
This claim is filed for fiscal year 20 — 20
This is a Supplemental 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 (Annu	ual Filing)			
n the case of a claim, for low-income rental housing lability company, that does not receive government finertain 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 Section 214(g)(1)(C).	nancing or receive love property are lower in tal exemption amount properties, may not exection 3 of form BOE	w-income housing tax cred acome households whose re- allowed under Revenue an exceed twenty million dollar i-267-L indicating you are so	lits, may qualify for ent does not exceed d Taxation Code se rs (\$20,000,000) in a	r exemption up to a dithe rent prescribed ction 214(g)(1)(C) to assessed value. You
lame of Organization		C	orporate ID or LLC	Number
ddress of Property (number and street)	<b>A A</b>			7
city, County, Zip Code				
ECTION 2. HOUSEHOLD INFORMATION				
A. List of Qualified Households				
Section 259.14 of the California Revenue and Taxation Co an affidavit reporting the following information on the units income, the maximum rent that can be charged to the hou additional sheets as necessary. Report information for each	occu <mark>pie</mark> d by lowe <mark>r inco</mark> usehold, and the <mark>ac</mark> tua	o <mark>me hous</mark> eholds for which ex I rent. Use the table below to	emption is claimed: provide the require	the actual household
			<del></del>	
Address/Unit Number	No. of Persons in Household	Income	aximum Allowable Rent That Can Be narged for the Unit	Actual Rent Charged to the Tenant
Address/Unit Number		Income	Rent That Can Be	Charged to
Address/Unit Number		Income	Rent That Can Be	Charged to
Address/Unit Number		Income	Rent That Can Be	Charged to
Address/Unit Number		Income	Rent That Can Be	Charged to
Address/Unit Number		Income	Rent That Can Be	Charged to
I certify (or declare) under penalty of perjury under the lany accompanying statements or docu	CERTIFIC laws of the State of Cal	ATION  ifornia that the foregoing and	Rent That Can Be narged for the Unit	Charged to the Tenant
I certify (or declare) under penalty of periury under the	CERTIFIC laws of the State of Caluments, is true, correct,	ATION  ifornia that the foregoing and	Rent That Can Be narged for the Unit	Charged to the Tenant

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.

