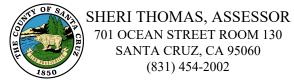
WELFARE EXEMPTION SUPPLEMENTAL AFFIDAVIT, HOUSEHOLDS EXCEEDING LOW-INCOME LIMITS "OVER-INCOME" TENANT DATA (140% AMI)



"OVER-INCOME" TENANT DATA (140% AMI)		3		1850	(831) 4:	54-2002
This claim is filed for fiscal year 20 2	0					
This is a Supplemental Affidavit filed with						
BOE-267, Claim for Welfare Exen	nption (First Filing)					
☐ BOE-267-A, Claim for Welfare Exc		ina)				
In the case of a property eligible for and re 42 or in the case of an owner of princome household, subject to a contract occupied by a lower income household subsequent lien dates the household income	roperty that is a that complies w for welfare exer	a community vith the requi mption purpo	land trust rements of ses of Rev	t (CLT) and Section 402. venue and Ta	whose property I, a unit shall co	is leased to a lower ntinue to be treated as
(1) the occupants' household income is no(2) the occupants were a lower income hou(3) the unit remains rent-restricted.						ze,
You must complete this affidavit if you checon a unit under the provisions of Revenue					indicating that yo	u are seeking exemption
SECTION 1. IDENTIFICATION OF APPLIC	ANT AND IDENT	IFICATION O	F PROPER	ГΥ		
Name of Organization				Corporate ID or LLC Number TC/		TCAC Number
Address of Property (number and street)						
City, County, Zip Code				Assessor's Parcel/Assessment Number(s)		
lower income rental housing property that welfare exemption on a lower income ren lower income household, where the claim limit but do not exceed 140 percent of area below to provide the required information, li rent restricted, as they may continue to be and Taxation Code. Provide information for units occupied by households exceeding least to the second s	tal housing prope ant seeks exempt a medium income, sting all such units treated as lower each unit that was	erty in which to tion on units of shall be accor s where the oc income units of s included on	he owner on the coupled by mpanied by coupant initiation and the property BOE-267-L	f property is a households whan affidavit tha ally met the incovision of sec or BOE-267-	a CLT and whose nose incomes rise at reports specific isome limitation and tion 214(g)(2)(A)(L1 in Section 4.C	e property is leased to a above the lower income information. Use the table d the unit continues to be iii) or (iv) of the Revenue 2 (Number of residential
if necessary. Address/Unit Number	No. of Persons in Household	Annual Household Income	Rent Tha	a Allowable at Can Be for the Unit	Actual Rent Charged to the Tenant	to From Which
I certify (or declare) under penalty of perju any accompanying statel	ry under the laws on ments or documents	of the State of C	ICATION California that ct, and comp	t the foregoing blete to the bes	and all information t of my knowledge a	contained herein, including and belief.
NAME OF CLAIMANT			TITLE	ITLE DATE		
SIGNATURE OF CLAIMANT		DAYTIME T	TELEPHONE EMAIL ADDRESS			

INSTRUCTIONS FOR FILING WELFARE EXEMPTION SUPPLEMENTAL AFFIDAVIT, HOUSEHOLDS EXCEEDING LOW-INCOME LIMITS — "OVER-INCOME" TENANT DATA (140% AMI)

This affidavit must be filed when seeking the welfare exemption on lower income rental housing property under the provisions of Revenue and Taxation Code sections 214(g)(2)(A)(iii) or (iv) and 259.15. These provisions are only applicable to lower income rental housing properties eligible for and receiving federal low-income housing tax credits (LIHTC) pursuant to Internal Revenue Code Section 42 or an owner of property that is a community land trust (CLT) and whose property is leased to a lower income household, subject to a contract that complies with the requirements of Section 402.1 and owned and operated by a nonprofit organization, eligible limited liability company, or limited partnership with an eligible managing general partner. Under these provisions, the welfare exemption continues to be available where the occupant(s) of a unit originally met the lower income threshold on the lien date in the fiscal year in which the occupancy of the unit commenced, but the household income of the occupants increased in subsequent years above the lower income limits, as long as the income does not exceed 140 percent of area median income (AMI), adjusted for family size ("over-income" tenants), and the unit continues to be rent restricted.

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 as provided for in Revenue and Taxation Code section 270. A separate affidavit must be filed for each location upon which you are seeking exemption under the provisions of Revenue and Taxation Code section 214(g)(2)(A)(iii) or (iv). If you indicated on supplemental affidavit BOE-267-L, Welfare Exemption Supplemental Affidavit, Housing – Lower Income Households, or BOE 267-L1, Welfare Exemption Supplemental Affidavit, Low-Income Housing Property Of Limited Partnership, that you are seeking exemption under this criteria, 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 259.15, the assessor shall keep this form confidential.

FISCAL YEAR

The fiscal year for which an exemption is being sought must be entered correctly. The proper fiscal year would be the fiscal year that follows the lien date (12:01 a.m., January 1) for which the taxable or exempt status of the property is being determined. For example, a person filing a timely claim in February 2018 would enter fiscal year "2018-2019" on their claim form. However, an entry of "2017-2018" on a claim form 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, the corporate identification number or LLC number assigned by the California Secretary of State, and the Tax Credit Allocation Committee (TCAC) number assigned to the rental housing project. 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 households for which the organization is seeking exemption under the provisions of Revenue and Taxation Code section 214(g)(2)(A)(iii) or (iv), as indicated upon checking the box in Section 4.A2 on BOE-267-L or BOE 267-L1. This listing shall be those units included in the number of residential units occupied by households exceeding lower income limits but do not exceed 140% AMI shown in Section 4.C2 on BOE-267-L or BOE 267-L1.