

2019 Senior Citizens Assessment Freeze <u>Homestead Exemption Application and Affidavit</u>

Part 1: Applicant information (Please type or print, or you can file this on-line at assessor.lakecountyil.gov)

1 2	First name	МІ	Last name	4 _ 5	Your Date of Birth (month, day,	year)	
23	Mailing address			5	Spouse Date of Birth (month, d	lay, year)	_
• -	City	State	ZIP	•	Telephone Number (please inclue	de area code)	_
				7 _	Email address		
P	art 2: Pro	perty informat	ion Is the pr	roperty owne	d in trust? YES NO A co	py of the trust may	y be required
•	Street address of property for which this exemption application is filed Township						
			IL		<u>Lake</u>		
	City			ZIP	County		
2	Property inde	ex number (PIN)			Note: The PIN is shown on you also be obtained from yo office website.		
3	Have you or yo	our spouse received th	is exemption for this p	property p	reviously?	Yes	No
4 If your spouse maintains a separate residence, has he or she applied for this exemption?					No		
5 Does this property have multiple dwelling units?					Yes	No	
	lf you answer	ed "Yes", write the nu	umber of units				

Part 3: Household income for 2018

You must include the income of you, your spouse, and all individuals who live in your household.

1	Social Security and SSI benefits. Include Medicare deductions in this total.	1		
2	Railroad Retirement benefits. Include Medicare deductions in this total.	2		
3	Civil Service benefits	3		
4a	Annuity benefits (See instructions for Line 4.)	4a		
4	Federally taxable pensions and retirement plan distributions	4b		
5	Human Services and other governmental cash public assistance benefits	5		
6	Wages, salaries, and tips from work	6		
7	Interest and dividends received	7		
8	Net rental, farm, and business income or (loss). (See instructions for Line 8.)	8		
9	Net capital gain or (loss). (See instructions for Line 9.)	9		
10	Other income or (loss). (See instructions for Line 10.)	10		
11	Add Lines 1 through 10.	11		
	Certain subtractions. You may subtract only the reported adjustments to income from U.S. 1040, Schedule 1 Line 36. Subtraction item Amount			
12a		12		
Add the amounts on Lines 12a and 12b and write the result.				
13 Subtract Line 12 from Line 11 and write the result. This is your total household incomefor 2018. If the amount is greater than \$65,000, STOP. You do not qualify for thisexemption. IF YOU DO NOT QUALIFY, PLEASE DO NOT RETURN THIS FORM.				

-CONTINUED ON REVERSE SIDE-

Part 4: Affidavit

Sworn under oath, I state the following:

- 1 (Mark the statement that applies.)
- a _____ On January 1, 2018 and January 1, 2019, the property identified in Part 2, Line 1, was used as my principal residence.
- b _____On January 1, 2018 and January 1, 2019, the property identified in Part 2, Line 1, was my principal residence for which I received this exemption previously and is either unoccupied or used as my spouse's principal residence. I am now a resident of a facility licensed under the Assisted Living and Shared Housing Act, Nursing Home Care Act, ID/DD (intellectually disabled/developmentally disabled) Community Care Act, or Specialized Mental Health Rehabilitation Act of 2013.

Name of facility		Mailing a	ddress				
2 (Mark the statement that applies.)							
 a On January 1, 2018 and Janu b On January 1, 2018 and Janu in Part 2, Line 1. c On January 1, 2018 and Janu used as a single-family resider 	uary 1, 2019, I ha uary 1, 2019, I ha	id a legal or e	equitable inte	rest by a writ	ten instrument	in the property	-
3 I am liable for paying real property t	axes on the prop	erty identifie	d in Part 2, L	ine 1.			
4 (Mark the statement that applies.)							
a In 2019, I am or will be 65 yea b In 2019, my spouse, who died			5 years of ag	e or older. (C	omplete the fo	llowing informa	ation.)
Deceased spouse's name	Date	of birth (mor	ith, day, year) Date	of death (mon	th, day, year)	
 homestead exemption for 2019. 6 The amount reported in Part 3, Line living in my household, and the tota 7 On January 1, 2019, the following in spouse is included if he or she used the individuals and my spouse (regnecessary.) First and last name 	I household incondividuals also us dividuals also us the property as	me for 2018 sed the prope his or her pr <u>her principal</u>	is \$65,000 or erty identifiec incipal dwelli <u>residence) a</u>	[,] r less. I in Part 2, Lir ng place on J	ne 1 for their pr lanuary 1, 2019 <u>Part 3.</u> (Attach	rincipal resider 9. <u>The total inc</u>	nce. My <u>come of</u> I sheet if
a	Yes	No	c			Yes	No
b							
 8 (Mark the statement that applies.) On January 1, 2019, I was a single, widow(er), or divorce your spouse's income must be includ c-1 My spouse's name and address 	ed in household	income even	if they do no	ot live with you		J	nember,
Street Address	City			State		ZIP	
Under penalties of perjury, I state tha and complete.	t, to the best of n	ny knowledge	e, the informa	ation containe	ed in this affidat	vit is true, corr	ect,
		[Dated				
Signature of applicant Subscribed and sworn to before me t	his day of _		, 201				
Notary Public Note: The CCAO may conduct an If you have any questions, please of	call: 847-377-20	50.				ion.	
Mail your completed Form PTAX-34	40 by July 1, 20	19 to: Uniet	County ASS	sessment Off	lice		

18 North County Street, 7th Floor

Waukegan, IL 60085

What is the Senior Citizens Assessment Freeze Homestead Exemption (SCAFHE)?

The senior citizens assessment freeze homestead exemption (35 ILCS 200/15-172) allows you, as a qualified senior citizen, to have your home's equalized assessed value (EAV) "frozen" at a base year value and prevent or limit any increase due to inflation. The base year generally is the year before the year you first qualify and apply for the exemption. For example, if you first qualify and apply in 2019, your property's EAV will be "frozen" at the 2018 EAV. The amount of the exemption is the difference between your base year EAV and your current year EAV. Freezing your property's EAV does not mean that your property taxes will not increase, however. Other factors also affect your tax bill. For example, your tax bill could increase if the tax rate, which is based on the amount of revenues taxing districts request, increases. Your EAV and tax bill may also increase if you add improvements to your home. However, if your home's EAV decreases in the future, you will benefit from any reduction.

Who is eligible?

The senior citizens assessment freeze homestead exemption qualifications for the 2019 tax year (for the property taxes you will pay in 2020), are listed below.

- You will be 65 or older during 2019.
- Your total household income in 2018 was \$65,000 or less.
- On January 1, 2018, and January 1, 2019, you
 - > used the property as your principal place of residence,
 - owned the property, or had a legal or equitable interest in the property as evidenced by a written instrument, or had a leasehold interest in the property used as a single-family residence, and
- > were liable for the payment of property taxes.

You do **not** qualify for this exemption if your property is assessed under the mobile home privilege tax.

Surviving spouse — Even if you are not 65 or older during 2019, you are eligible for this exemption for 2019 if your spouse died in 2019 and would have met all of the qualifications.

Residents in a health facility — Even if you did not use the property as your principal place of residence on January 1, 2019, you qualify for this exemption if you are a resident of a facility licensed under the Assisted Living and Shared Housing Act, Nursing Home Care Act, ID/DD (intellectually disabled/ developmentally disabled) Community Care Act, Or Specialized Mental Health Rehabilitation Act of 2013 and you meet all other requirements, have received this exemption previously, **and** your property is either unoccupied or is occupied by your spouse. **Residents of cooperatives** — If you are a resident of a cooperative apartment building or cooperative life-care facility, you qualify for this exemption if you are liable for the payment of property taxes on your residence and meet the other eligibility requirements.

What is a household?

A household includes you and your spouse, and all other persons who used your residence as a principal dwelling place on January 1, 2019.

What is included in household income?

Household income includes your income, your spouse's income, and the income of **all** individuals living in the household. Examples of income that must be included in your household income are listed below. (For specific questions, see Part 3 on Page 4.)

- alimony or maintenance received
- · annuities and other pensions
- Black Lung benefits
- business income
- · capital gains
- cash assistance from the Illinois Department of Human Services and other governmental cash public assistance
- cash winnings from such sources as raffles and lotteries
- · Civil Service benefits

- damages awarded in a lawsuit for nonphysical injury or sickness (for example, age discrimination or injury to reputation)
- dividends
- farm income
- Illinois Income Tax refund (only if you received Form 1099-G)
- interest
- interest received on life insurance policies
- long term care insurance (federally taxable portion only)
- · lump sum Social Security payments
- miscellaneous income, such as from rummage sales, recycling aluminum, or baby sitting
- military retirement pay based on age or length of service
- monthly insurance benefits
- pension and IRA benefits (federally taxable portion only)
- Railroad Retirement benefits (including Medicare deductions)
- rental income
- Social Security income (including Medicare deductions)
- Supplemental Security Income (SSI) benefits
- all unemployment compensation
- wages, salaries, and tips from work
- Workers' Compensation Act income
- Workers' Occupational Diseases Act income

What is not included in household income?

Some examples of income that are not included in household income are listed below. (For specific income questions, see Part 3 on Page 4.)

- cash gifts
- child support payments
- COBRA subsidy payments
- damages awarded in a lawsuit for a physical personal injury or sickness
- Energy Assistance payments
- · federal income tax refunds
- IRA's "rolled over" into other retirement accounts, unless "rolled over" into a Roth IRA
- lump sums from inheritances
- · lump sums from insurance policies
- money borrowed against a life insurance policy or from any financial institution
- reverse mortgage payments
- spousal impoverishment payments
- stipends from the Foster Parent and Foster Grandparent programs
- · Veterans' benefits

What if I have a net operating loss or capital loss carryover from a previous year?

You cannot include any carryover of net operating loss or capital loss from a previous year. You can include only a net operating loss or capital loss that occurred in 2018.

Will my information remain confidential?

All information received from your application is confidential and may be used only for official purposes.

When must I file?

File the PTAX-340 application with the CCAO by the due date of July 8, 2019. You must file Form PTAX-340 **every year** and meet the qualifications for that year to continue to receive the exemption.

Note: The CCAO may require additional documentation *(i.e., birth certificates, tax returns, etc.)* to verify the information in this application.

What if I need additional assistance?

If you have questions about this form, please contact your Chief County Assessment Office at **847-377-2050** or visit them at the address printed at the bottom of Page 2.

Form PTAX-340 Step-by-Step Instructions - This application can be filed on-line at assessor.lakecountyil.gov

Part 1: Applicant information

Lines 1 through 7 — Type or print the requested information.

Part 2: Property information

household.

plication is filed.

Lines 3, 4 and 5 — Answer the questions by marking an "X" Line 6 — Wages, salaries, and tips from work next to your statement.

Part 3: Household income for 2018

"Income" for this exemption means 2018 federal adjusted gross income, plus certain items subtracted from or not included in your federal adjusted gross income (320 ILCS 25/3.07). These include tax-exempt interest, dividends, annuities, net operating loss carryovers, capital loss carryovers, and Social Security benefits. Income also includes public assistance payments from a Line 8 — Net rental, farm, and business income or (loss) governmental agency, SSI, and certain taxes paid. These Stepby-Step instructions provide federal return line references and reporting statement references, whenever possible. The amounts written on each line must include the 2018 income for you, your spouse, and **all** the individuals living in the

Line 1 — Social Security and Supplemental Security Income (SSI) benefits

Write the total amount of retirement, disability, or survivor's benefits (including Medicare deductions) the entire household received from the Social Security Administration (shown on Form SSA-1099, box 3 or use box 5 only if there is a reduction of benefits). You also must include any Supplemental Security Income (SSI) the entire household received and any benefits to dependent children in the household. Do not include reimbursements under Medicare/Medicaid for medical expenses.

Note: The amount deducted for Medicare (\$1,608.00 yearly or \$134.00 per month, per person) is already included in the amount in box 3 of Form SSA-1099.

Line 2 — Railroad Retirement benefits

Write the total amount of retirement, disability, or survivor's benefits (including Medicare deductions) the entire household received under the Railroad Retirement Act (shown on Forms SSA-1099 and RRB-1099).

Line 3 — Civil Service benefits

Write the total amount of retirement, disability, or survivor's benefits the entire household received under any Civil Service retirement plan (shown on Form 1099-R).

Line 4 — Annuities and other retirement income

A) Write the total amount of income the entire household received as an annuity from any annuity, endowment, life insurance contract, or similar contract or agreement (shown on Form 1099-R).

B) Include only the federally taxable portion of pensions, IRAs, and IRAs converted to Roth IRAs (shown on U.S. 1040 Line 4b). IRA's are not taxable when "rolled over," unless "rolled over" into a Roth IRA.

Line 5 — Human Services and other governmental cash public assistance benefits

Write the total amount of Human Services and other governmental cash public assistance benefits the entire household received. If the Line 7 - Write the names of the individuals, other than first two digits of any member's Human Services case number are yourself, including your spouse, along with any persons who the same as any of those in the following list, you must include the used the property for their principal residence on January 1, total amount of any of these benefits on Line 5.

01 aged	04 and 06 temporary assistance to
02 blind	needy families (TANF)
03 disabled	07 General Assistance

To determine the total amount of the household benefits, multiply the monthly amount each person received by 12. You must adjust your figures accordingly if anyone in the household did not receive 12 equal checks during this period. Food stamps, medical assistance benefits anyone in the household may have Lines 1 and 2 — Identify the property for which this ap-received are not considered income and should not be added to your total income.

Write the total amount of wages, salaries, and tips from work for every household member (shown in box 1 of Form W-2).

Line 7 — Interest and dividends received

Write the total amount of interest and dividends the entire household received from all sources, including any government sources (shown on Forms 1099-INT, 1099-OID, and 1099-DIV). You must include both taxable and nontaxable amounts.

Write the total amount of net income or loss from rental, farm, business sources, etc., the entire household received, as allowed on U.S. 1040, Schedule 1, Lines 12, 17, and 18. You **cannot** use any net operating loss (NOL) carryover in figuring income.

Line 9 — Net capital gain or (loss)

Write the total amount of taxable capital gain or loss the entire household received in 2018, as allowed on U.S. 1040. Schedule 1, Lines 13 and 14. You **cannot** use a net capital loss carryover in figuring income.

Line 10 — Other income or (loss)

Write the total amount of other income or loss not included in Lines 1 through 9 that is included in federal adjusted gross income, such as alimony received, unemployment compensation, and taxes withheld from oil or gas well royalties. You **cannot** use any net operating loss (NOL) carryover in figuring income.

Line 11 — Add Lines 1 through 10.

Line 12 — Subtractions

You may subtract only the reported adjustments to income totaled on U.S. 1040 Schedule 1, Line 36. For example

- IRA deduction
- Archer MSA deduction
- moving expenses
- alimony or maintenance paid
- health savings account deduction
- student loan interest deduction
- jury duty pay you gave to your employer •
- deductible part of self-employment tax
- self-employed health insurance deduction
- self-employed SEP, SIMPLE, and gualified plans
- penalty on early withdrawal of savings

Line 13 — Total household income

Subtract Line 12 from Line 11. If this amount is greater than \$65,000, you do not qualify for this exemption. See Page 3

Part 4: Affidavit

Lines 1 through 4 — Mark the item that applies. Read the affidavit carefully. The statements must apply.

2019. Attach an additional sheet if necessary.

Line 8 — Follow the instructions on the form. If your spouse does not reside at this property, be sure to write his or her name and address.

Note: You must sign your Form PTAX-340 and have it notarized before you file it with your Chief County Assessment Office. Their office will notarize your form free of charge if you bring it in personally and sign it in their presence.

 Educator expenses Tuition and fees

- Domestic production
 - activities deduction