PTAX-340

2021 Senior Citizens Assessment Freeze Homestead Exemption Application and Affidavit

ast date to apply: July 1, 2021				
art 1: Applicant information (Please type	or print.)			
1		3//	_	
First name MI Last nan	ne	Date of birth (month, o	lay, year)	
2		4 ()	-	
Mailing address		Area code and phone number 5 Email address		
art 2: Property information				
1 PIN:				
Property (parcel) index number (PIN)				
Street address of property for which this exemption application	in file d	Taumahin		
		Township	LINITY	
City	IL ZIP	MCHENRY CO County	UNIY	
Note: The PIN is shown on your property tax bill.		•	nty assessment	officer
(CCAO). If you cannot obtain the PIN, attach a co	opy of the legal descrip	tion.	•	
3 Have you or your spouse received this exemption	n for this property previo	ously?	Yes	No
4 If your spouse maintains a separate residence, h	as he or she applied fo	r this exemption?	Yes	No
Railroad Retirement benefits. Include Medicare de Civil Service benefits Annuities, federally taxable pensions and retireme Human Services and other governmental cash puls Wages, salaries, and tips from work Interest and dividends received Net rental, farm, and business income or (loss). (So Net capital gain or (loss). (See instructions for Line Of Other income or (loss). (See instructions for Line Add Lines 1 through 10. Certain subtractions. You may subtract only the russ. 1040, Schedule 1, Line 22.	ent plan distributions. blic assistance benefits See instructions for Line e 9.) 10.)	e 8.)	3 4 5 6 7 8	
Subtraction item	Amou	unt		
12a 12b		<u> </u>		
12b		<u> </u>	10	_
Add the amounts on Lines 12a and 12b, and write			12	
3 Subtract Line 12 from Line 11, and write the resu for 2019. If the amount is greater than \$65,000, \$			13	
	Do not write in this space.			
Base year	Ва	se year EAV	\$	
Revised base year	Re	vised base year EAV	\$	
Income verifiedYesNo				

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'art 4: Affidavit				
worn under oath, I state the following:				
(Mark the statement that applies.)	Lina 1 waa imaray	ad with a narmanant	otruoturo	
On January 1, 2021, the property identified in Part 2, athat I used as my principal residence.	Line 1, was improve	eu wiin a pennaneni	Structure	
b for which I received this exemption previously	and is either unocc	unied or used as my	snouse's principal r	esidence
I am now a resident of a facility licensed under				
Act, ID/DD (intellectually disabled/developme				
Rehabilitation Act of 2013.	,	,	•	
Name of facility	Mailian add			
Name of facility (Mark the statement that applies.)	Mailing addr	ess		
On January 1, 2021, I				
a was the owner of record of the property identif	fied in Part 2. Line	1.		
had a legal or equitable interest by a written in			Line 1.	
had a leasehold interest in the property identif				nce.
I am liable for paying real property taxes on the prope	erty identified in Par	t 2. Line 1.		
Note: If I have not received this exemption for this pro			requirements listed	in Part 4,
Lines 1, 2, and 3 for this property on January		,	·	ŕ
(Mark the statement that applies.)				
aIn 2021, I am, or will be, 65 years of age or old	ler.			
bIn 2021, my spouse, who died in 2021, would ha	ave been 65 years of	age or older. (Compl	ete the following infor	mation.)
	/_	/		
Deceased spouses name	Date of deat	th (month, day, year)		
The property identified in Part 2, Line 1, is the only prohomestead exemption for 2021.	operty for which I a	m applying for a seni	or citizens assessm	ent freeze
The amount reported in Part 3, Line 13, of this form in and the total household income for 2020 is \$65,000 or		of my spouse and al	I persons living in m	y household
On January 1, 2021, the following individuals also use		ntified in Part 2 Line	1 for their principal	residence
My spouse is included if he or she used the property a				
income of all individuals and my spouse (regardless of				
additional sheet if necessary.)		,	•	
First and last name		Relations	ship to applicant	
a				
b				
(Mark the statement that applies.)				
On January 1, 2021, I was				
	arried and living toge	ether C ma	arried, but not living t	ogether
olligio, widow(ci), of divoloca.	inica and living tog	Janor. •	arrica, bat not nving t	logotiioi.
Spaugos address IE DIEFEDENT.				
Spouses address. IF DIFFERENT: First name	MI	Last na	ime	
Street Address	City	State	ZIP	
nder penalties of perjury, I state that, to the best of my know	ledge, the informatio	n contained in this affi	davit is true, correct, a	nd complete.
		1		
		/		
Signature of Applicant	I.	Month Day Year		

Mail your completed Form PTAX-340 to:



McHenry County Assessment Office 2200 N SEMINARY AVE WOODSTOCK IL 60098

(LOCATION: ADMIN BLDG ON WARE RD, RM 106)

If you have any questions, please call:

(815) 334 - 4290 Last date to apply <u>07 / 01 / 2021</u>

For PTAX-340 General Information

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 2021, your property's EAV will be "frozen" at the 2020 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 2021 tax year (for the property taxes you will pay in 2022), are listed below.

- You will be 65 or older during 2021.
- Your total household income in 2020 was \$65,000 or less.
- On January 1, 2020, **and** January 1, 2021, 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 2021, you are eligible for this exemption for 2021 (and possibly 2020) if your spouse died in 2021 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, 2020, 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 the property taxes on your residence and meet the other eligibility requirements.

What is a household?

A household includes you, your spouse, and all other persons who used your residence as a principal dwelling place on January 1, 2021.

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 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 2020.

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 Form PTAX-340 with the CCAO by the due date printed on the bottom of Page 2. 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) to verify the information in this application.

What if I need additional assistance?

If you have questions about this form, please contact your CCAO, also known as the supervisor of assessments, or county assessor, at the address and phone number printed at the bottom of Page 2.

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Form PTAX-340 Step-by-Step Instructions

Part 1: Applicant information

Lines 1 through 5 — Type or print the requested information.

Part 2: Property information

Lines 1 and 2 — Identify the property for which this application is filed.

Lines 3 and 4 — Answer the questions by marking an "X" next to your statement. If you answered "Yes" to the question on Line 3 and you know the base year, write it in the space provided.

Part 3: Household income for 2020

"Income" for this exemption means 2020 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 governmental agency, SSI, and certain taxes paid. These Step-by-Step Instructions provide federal return line references and reporting statement references, whenever possible.

The amounts written on each line must include the 2020 income for you, your spouse, and all the other individuals living in the household.

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 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

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). Include only the federally taxable portion of pensions, IRAs, and IRAs converted to Roth IRAs (shown on U.S. 1040, Line 4b). IRAs 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 first two digits of any member's Human Services case number are the same as any of those in the following list, you must include the total amount of any of these benefits on Line 5.

01 aged 02 blind

03 disabled

04 and 06 temporary assistance to needy families (TANF) 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 and medical assistance benefits anyone in the household may have received are not considered income and should not be added to your total income.

Line 6 — Wages, salaries, and tips from work

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.

Line 8 — Net rental, farm, and business income or (loss) 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 3, 5, and 6. 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 2020, as allowed on U.S. 1040, Line 6 and U.S. 1040, Schedule 1, Line 4. 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, 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 22. For example

- IRA deduction
 - Archer MSA deduction
- moving expenses
- Educator expenses
- Tuition and fees
- Domestic production activities deduction 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 qualified 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.

Line 7 — Write the names and tax identification numbers of the individuals, other than yourself, who used the property for their principal residence on January 1, 2021. 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 CCAO. Return your completed Form PTAX-340 to your CCAO's office or mail it to the address printed on the bottom of Page 2.

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