

# PTAX-340 2011 Senior Citizens Assessment Freeze Homestead Exemption Application and Affidavit

Last date to apply: **JULY 1, 2011**

## Part 1: Applicant information (Please type or print.)

1 \_\_\_\_\_  
First name MI Last name

2 \_\_\_\_\_  
Mailing address

3 \_\_\_\_\_  
Social Security Number (Optional)

4 \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Date of birth (month, day, year)

5 ( \_\_\_\_\_ ) \_\_\_\_\_  
Telephone number (include area code)

\_\_\_\_\_ City State ZIP

## Part 2: Property information

1 \_\_\_\_\_  
Street address of property for which this exemption application is filed Township

\_\_\_\_\_ City **IL** \_\_\_\_\_  
ZIP County

2 \_\_\_\_\_  
Property index number (PIN)

**Note:** The PIN is shown on your property tax bill. You also may obtain it from your chief county assessment officer (CCAO). If you cannot obtain the PIN, attach a copy of the legal description.

3 Have you or your spouse received this exemption for this property previously?  Yes  No  
If you answered "Yes", write the base year, if known. \_\_\_\_\_

4 If your spouse maintains a separate residence, has he or she applied for this exemption?  Yes  No

## Part 3: Household income for 2010

You must include the income of you, your spouse, and all other 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 _____
4 Annuities, federally taxable pensions and retirement plan distributions.	4 _____
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 _____
12 Certain subtractions. You may subtract only the reported adjustments to income from U.S. 1040, Line 36, or U.S. 1040A, Line 20.	
<b>Subtraction item</b>	<b>Amount</b>
12a _____	_____
12b _____	_____
Add the amounts on Lines 12a and 12b, and write the result.	12 _____
13 Subtract Line 12 from Line 11, and write the result. This is your total household income for 2010. If the amount is greater than \$55,000, <b>STOP</b> . You do not qualify for this exemption.	13 _____

Do not write in this space.

Date received _____	Income verified <input type="checkbox"/> Yes <input type="checkbox"/> No
Application number _____	Base year EAV \$ _____
Base year _____	Revised base year EAV \$ _____
Revised base year _____	EAV of added improvements \$ _____
Approved <input type="checkbox"/> Yes <input type="checkbox"/> No	Base amount \$ _____

**Part 4: Affidavit**

Sworn under oath, I state the following:

**1** (Mark the statement that applies.)

On January 1, 2011, the property identified in Part 2, Line 1, was improved with a permanent structure

**a** \_\_\_ that I used as my principal residence.

**b** \_\_\_ 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, or MR/DD (mentally retarded/developmentally disabled) Community Care Act.

\_\_\_\_\_  
Name of facility

\_\_\_\_\_  
Mailing address

**2** (Mark the statement that applies.)

On January 1, 2011, I

**a** \_\_\_ was the owner of record of the property identified in Part 2, Line 1.

**b** \_\_\_ had a legal or equitable interest by a written instrument in the property listed in Part 2, Line 1.

**c** \_\_\_ had a leasehold interest in the property identified in Part 2, Line 1, that was used as a single-family residence.

**3** I am liable for paying real property taxes on the property identified in Part 2, Line 1.

**Note:** If I have not received this exemption for this property previously, I also met the eligibility requirements listed in Part 4, Lines 1, 2, and 3 for this property on January 1, 2010.

**4** (Mark the statement that applies.)

**a** \_\_\_ In 2011, I am, or will be, 65 years of age or older.

**b** \_\_\_ In 2011, my spouse, who died in 2011, would have been 65 years of age or older. (Complete the following information.)

\_\_\_\_\_  
Deceased spouse's name

\_\_\_\_\_  
Social Security Number (Optional)

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Date of birth (month, day, year)

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Date of death (month, day, year)

**5** The property identified in Part 2, Line 1, is the only property for which I am applying for a senior citizens assessment freeze homestead exemption for 2011.

**6** The amount reported in Part 3, Line 13, of this form includes the income of my spouse and all persons living in my household and the total household income for 2010 is \$55,000 or less.

**7** On January 1, 2011, the following individuals also used the property identified in Part 2, Line 1, for their principal residence. My spouse is included if he or she used the property as his or her principal dwelling place on January 1, 2011. The total income of the individuals and my spouse (regardless of his or her principal residence) are included in Part 3. (Attach an additional sheet if necessary.)

**First and last name**

**Social Security Number (Optional)**

**a** \_\_\_\_\_

**b** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**8** (Mark the statement that applies.)

On January 1, 2011, I was

**a** \_\_\_ single, widow(er), or divorced.

**b** \_\_\_ married and living together.

**c** \_\_\_ married, but not living together.

My spouse's name and address is

\_\_\_\_\_  
First name

\_\_\_\_\_  
MI

\_\_\_\_\_  
Last name

\_\_\_\_\_  
Street Address

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
ZIP

Under penalties of perjury, I state that, to the best of my knowledge, the information contained in this affidavit is true, correct, and complete.

\_\_\_\_\_  
Signature of applicant

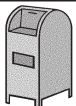
\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Date (month, day, year)

Subscribed and sworn to before me this

\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
Notary public

**Note:** The CCAO may conduct an audit to verify that the taxpayer is eligible to receive this exemption.



**Mail your completed Form PTAX-340 to:**

MCHENRY COUNTY ASSESSMENTS OFFICE

2200 N SEMINARY AVE (ADMIN BLDG ON WARE RD)

\_\_\_\_\_  
Mailing address  
WOODSTOCK

IL 60098

\_\_\_\_\_  
City

\_\_\_\_\_  
ZIP

**If you have any questions, please call:**

( 815 ) 334 — 4290

Last date to apply 0 / 7 / 0 1 / 2 / 0 1 / 1  
Month Day Year

# Form 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 2011, your property's EAV will be "frozen" at the 2010 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 2011 tax year (for the property taxes you will pay in 2012), are listed below.

- You will be 65 or older during 2011.
- Your total household income in 2010 was \$55,000 or less.
- On January 1, 2010, **and** January 1, 2011, 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 2011, you are eligible for this exemption for 2011 (and possibly 2010) if your spouse died in 2011 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, 2011, 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, or MR/DD (mentally retarded/developmentally disabled) Community Care Act, 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, 2011.

## 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
- Illinois Cares Rx rebate (only if you took an itemized deduction for health insurance in the prior year on your federal income tax return)
- 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
- Circuit Breaker grants
- COBRA subsidy payments
- damages awarded in a lawsuit for a physical personal injury or sickness
- Energy Assistance payments
- federal economic stimulus 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 2010.

## 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.

# 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 2010

“**Income**” for this exemption means 2010 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 2010 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 (\$1,326.00 yearly or \$110.50 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

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 15b and 16b, or U.S. 1040A, Line 11b and 12b). 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 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.

- |                    |  |
|--------------------|--|
| <b>01</b> aged     | <b>04 and 06</b> temporary assistance to |
| <b>02</b> blind    | needy families ( <b>TANF</b> )           |
| <b>03</b> disabled | <b>07</b> 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, and Circuit Breaker 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, 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 2010, as allowed on U.S. 1040, Lines 13 and 14, or U.S. 1040A, Line 10. 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, Line 36 or U.S. 1040A, Line 20. 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
- one-half of self-employment tax
- self-employed health insurance deduction
- self-employed SEP, SIMPLE, and qualified plans
- penalty on early withdrawal of savings
- Educator expenses
- Tuition and fees
- Domestic production activities deduction

### Line 13 — Total household income

Subtract Line 12 from Line 11. If this amount is greater than \$55,000, **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, 2011. 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.

# MCHENRY COUNTY BOARD OF REVIEW



**HEARING LOCATION: NORTH OF COURTHOUSE COMPLEX  
AT THE COUNTY ADMINISTRATION BUILDING  
667 WARE RD – SUITE 106  
WOODSTOCK, IL 60098**

Mailing Address: 2200 N SEMINARY AVE, WOODSTOCK IL 60098  
**PHONE 815-334-4290 FAX 815-338-8522**  
E-MAIL [assessments@co.mchenry.il.us](mailto:assessments@co.mchenry.il.us)

Robin Brunshon, CIAO-I, Chairman  
Jan George Hervert, CIAO-I, Member  
Mark Ruda, Member

Robert H. Ross, ASA  
Ex-officio Clerk

Dear Exemption Applicant:

Here is your **2011 Senior Citizens Assessment Freeze Homestead Exemption Application**. Since this exemption does not automatically carry over to the next year, **you must reapply each year**. The deadline for filing is **July 1, 2011**.

Mail this form to the address listed on the bottom of Page 2 of the application. **Do not include it with your property tax bill or, especially, your Circuit Breaker form**. The Circuit Breaker goes to the State and we have heard from them that they will no longer forward any Freeze applications to this office.

If you do not qualify for 2011 because your household income for 2010 was over \$55,000, please write your name, address and PIN on the appropriate lines in Sections 1 and 2, write **“Over Income”** across Section 3, and mail the application form to this office. This will ensure that a new application is mailed to you for 2012.

Each year we must return many applications to the sender because required information is not provided. To prevent this happening to you, please observe the following:

- The person listed as the **applicant** must sign the application. If someone other than the applicant signs for the applicant, a Power of Attorney must accompany the application.
- Do not enter just a total in the income section. Your income must be broken down according to the categories listed. **List yearly amounts**. If you must list a monthly amount, write “monthly” beside that amount. Please remember, we must have the incomes of everyone listed on Page 2, Section 7. If one or more of them has no income, please indicate this by writing “no income” beside the name. If we have a question concerning any amount listed, we will request proof of income such as copies of your Federal Income Tax Return, W2 forms, or 1099 forms.
- The names and Social Security numbers of everyone residing at the residence should be listed on Page 2, Section 7. **This includes the names and numbers of husbands and/or wives**.
- **The application must be notarized**. Make sure the notary signs and stamps the application. Notaries can be found at banks, currency exchanges, some local assessor’s offices (check with them first) and at this office. There should be no charge to have your signature notarized.

If you have questions or require help filling out the application please don’t hesitate to call or come in to the **McHenry County Office of Assessments, (Ware Rd. Admin. Bldg.), 2200 N. Seminary Ave., Woodstock IL 60098, (815) 334-4290**. Our office hours are from 8:00 AM until 4:30 PM Monday through Friday. Forms are also available on our website at [www.co.mchenry.il.us](http://www.co.mchenry.il.us). You may also obtain a form from you local Township Assessor.