

Low-Income Senior Freeze Exemption Guide 2023

Charlie Mullin

Phone: 847-244-1101 (Press 2)

Email: cmullin@warrentownship.net

17801 W. Washington Street

Gurnee, IL 60031

Courtesy of Warren Township Assessor's Office

All documentation is required to be uploaded as a photo or scan

Required documents

- Government ID
- 2022 federal income tax return forms, including all additional 1040 schedules & attachments
- Trust documents (if applicable)

Before beginning the application, please have all 2022 federal income tax return forms and documentation prepared.

Begin at the Lake County Chief County Assessment Office website
Assessor.lakecountyil.gov

➔ Next, select **Smartfile E-file Portal**

Enter your Lake County login information, or create an account

➔ Select **Login**

The screenshot shows the website for the Lake County Chief County Assessment Office. The header includes the Lake County logo and navigation links: Assessments, Board of Review, GIS/Mapping, Resources, and Tax Relief. The main banner features the text 'CHIEF COUNTY Assessment Office LAKE COUNTY, IL' over an aerial view of a rural landscape. A search bar is present with the placeholder text 'Search...' and a magnifying glass icon. Below the search bar, a checkbox option reads 'Only search Chief County Assessment Office'. A large orange arrow points to the 'Smartfile E-Filing Portal' link in the bottom navigation bar. Below the navigation bar, the 'Login' section contains two input fields for 'Email' and 'Password'. An orange arrow points to the 'Login' button. Below the login button are links for 'Guest Login', 'Forgot password?', and 'New user? Create an account'.

LakeCounty Assessments Board of Review GIS/Mapping Resources Tax Relief

CHIEF COUNTY
Assessment Office
LAKE COUNTY, IL

Search...

☐ Only search Chief County Assessment Office

Smartfile E-Filing Portal Help Ticket Township Assessors Maps Online Tax Parcel Viewer Assessment and Tax Info

Login

Email

Password

Login

Guest Login
Forgot password?
New user? Create an account

➡ In Available Filings select **“EX02: Low-Income Senior Freeze Application (Annual)”**

Available Filings

To create a new filing, click on a filing type below.

[AA01: Mailing Address Change](#)
Address Change Request Form

[AP01: Assessment Appeal](#)

Use this form to file an appeal of your property assessment with the Board of Review. For filing deadlines, go to boardofreview.lakecountyil.gov, and click "Filing Deadlines and Decision Mailed Dates" on the left-hand side.

[AP02: Additional Evidence for Previous Filing](#)

Use this form to submit additional evidence on a previously filed assessment appeal, homestead exemption application, non-homestead exemption application, or preferential assessment request. Do not use this to file a renewal of an exemption or preferential assessment, only to attach supplemental information on a filing.

[EX02: Low-Income Senior Freeze Application \(Annual\)](#)

Use this form to file for the Low-Income Senior Citizen's Assessment Freeze (the "Senior Freeze"). This exemption freezes the assessed value of your property for tax purposes. (Please note: It does not freeze your tax rate.) To qualify, applicants must be 65 or older, own the property as their principal residence for the past two January 1st dates, and have a total household income of \$65,000 or less. The deadline for filing is July 31st, to affect the tax bill issued the following May.

➡ Select **Begin Filing**

Senior Freeze Application (Annual)

This filing is for the Senior Freeze.

To qualify, applicants must be 65 years of age or older and live in the property as their principal residence for the last two January 1st dates. The total household income for the prior year must be \$65,000 or less.

[Begin Filing](#)

➡ Enter tax year 2023

Then, search by **PIN OR property address**

*Be sure your PIN does not include any hyphens or spaces. Additionally, if searching address use *only* house number and street name. Do not include street direction or suffix.

➡ Select **Search**

➡ Confirm the correct property and select **Start Filing**

Verify your property information

➡ Select **Next**

Search for Property

Please search for your property using **ONE** of the search options below. If you know your **PIN**, you do not need to fill in any of the other search boxes. If trying to search by name, the search works most effectively by using last name. Once you find your property, select it in the search results grid, then click the Start Filing button.

Tax Year:*

Required

If you know your Property's Identification Number (PIN), enter it here:

Parcel PIN:

Without hyphens or spaces

OR

you do not know your Property's Identification Number (PIN), you can search by Owner Name or Property Address:

Owner Name:

LastName, FirstName

A wildcard is assumed at the end; to include a wildcard in another position type '%'. For example:

Frank will return: Frank, Franklin, Franken, Frankel, etc.

B%o%ski will return: Bojarski, Bronowski, Bukowski, etc.

Building/House Number:

Street Name:

Search

Search Results

Parcel PIN	Location Address
Start Filing	

1 - 1 of 1 items

Verify Property Information

Please verify you have selected the correct property.

PIN

Location Address

Cancel Filing

Next

Fill in all household members information. This is to ensure all income is accounted for. Additional household members include spouse, and any other individuals living in household.

➔ Select "Add" to enter information of additional household members.

➔ When all entries have been completed select Next

Next, fill in appropriate selections for your application

Household Information

Please provide details for all household members currently residing in/on this property.

Click on your name below to highlight it in blue before filling out the Applicant Information section. All household members must be included. Your spouse must also be listed (whether you are married or not).

Add

#	Household Member
1	

1 - 1 of 1 items

Applicant Information

Household Member's Name:

Address:

Date of Birth: Phone:

Email:

This person's income will be included in application: ☒

Click 'Add' from the top of the page to add additional Household Members. When all members have been added, click 'Next' to continue.

Previous

Cancel Filing

Next

Verify Parcel

Applicant

Application

Attachments

Submit

Application Information

Please provide details for the application.

Property Information

Is this property Owned in Trust?

Property Address:

Have you or your spouse received this exemption previously?

If your spouse maintains a separate residence, has he/she applied for this exemption?

Does this property have multiple dwelling units?

Is any part of the home used for commercial purposes?

The following section will vary for each individual, depending on the required household income tax return forms.

The example for this guide is using a basic 1040-SR, but certain applicants may additionally require forms such as form 8829, 1099R, 1040 Schedules 1, C, D, E, F and statements referenced on schedule 1.

Located on page 8 is the “need help?” step by step instructions, and our contact information if additional assistance is needed.

All forms used must be included in attachments on page 6

➡ Select **Calculate**

*4B- If you have received annuities, subtract the taxable annuity amount (form 1099-r)

*8,9,10- do not include net operating loss (NOL)

1. Social Security and SSI Benefits. Include Medicare deductions:	1.	Line 6A
2. Railroad Retirement Benefits. Include Medicare Deductions:	2.	SSA-1099 & RBR-1099
3. Civil Service Benefits:	3.	1099-R
4a. Annuity Benefits(See instructions for Line 4):	4a.	1099-R (gross amount)
* 4b. Federally Taxable pensions and retirement plan distributions:	4b	Line 4B+5B
5. Human Services and other governmental case public assistance:	5.	See “need help?”
6. Wages, Salaries, and tips from work:	6.	Line 1Z
7. Interest and dividends received:	7.	Line 2B+3B
* 8. Net Rental, farm, and business income (loss). (See instructions for line 8):	Schedule 1 8.	Line 3,5,6
* 9. Net Capital gain or (loss). (See instructions for Line 9):	Line 4, Schedule 1 9.	Line 7 (Add Sch. D)
* 10. Other income or (loss). (See instructions for Line 10):	Schedule 1 10.	Line 1,2A,4,7,9
11. Add Lines 1 through 10:	11.	
12. Certain Subtractions. You may subtract only the reported adjustment to income from US 1040, Schedule 1, Part 2:		
12a. Subtraction Item A: Schedule 1	Amount:	
12b. Subtraction Item B: All items included on Line 26	Amount:	
13. Subtract Lines 12a and 12b from Line 11. This is your total household income for this year:	13.	
		Calculate

➡

Form 1040-SR Department of the Treasury—Internal Revenue Service 2022 U.S. Tax Return for Seniors			
1a	Total amount from Form(s) W-2, box 1 (see instructions)	1a	
b	Household employee wages not reported on Form(s) W-2	1b	
c	Tip income not reported on line 1a (see instructions)	1c	
d	Medicaid waiver payments not reported on Form(s) W-2 (see instructions)	1d	
e	Taxable dependent care benefits from Form 2441, line 26	1e	
f	Employer-provided adoption benefits from Form 8839, line 29	1f	
g	Wages from Form 8919, line 6	1g	
h	Other earned income (see instructions)	1h	
i	Nontaxable combat pay election (see instructions)	1i	
z	Add lines 1a through 1h	1z	
2a	Tax-exempt interest	2a	
3a	Qualified dividends	3a	
4a	IRA distributions	4a	
5a	Pensions and annuities	5a	
6a	Social security benefits	6a	
b	Taxable interest	2b	
b	Ordinary dividends	3b	
b	Taxable amount	4b	
b	Taxable amount	5b	
b	Taxable amount	6b	
c	If you elect to use the lump-sum election method, check here (see instructions)		☐
7	Capital gain or (loss). Attach Schedule D if required. If not required, check here	7	
Page 2		8	Schedule 1
8 Other income from Schedule 1, line 10		10	Schedule 1
10 Adjustments to income from Schedule 1, line 26			

Continue to fill in appropriate selections

→ Select **Next**

Upload a photo or scan of the following:

- Government ID
- 2022 federal income tax return forms, including all additional 1040 schedules & attachments
- Trust documents (if applicable)

(Continue to next page for more information on uploading documentation)

Affidavit

1. Mark the Statement that Applies

- ☐ 1a. On Jan 1, 2022 & Jan 1, 2023, the property identified in this application was used as my principal residence.
- ☐ 1b. On Jan 1, 2022 & Jan 1, 2023, the property identified in this application was my principal residence in which I received this exemption previously and is either unoccupied or used as spouse's principal Residence. I am now a resident of a facility licensed under the Assisted Living & Shared Housing Act, or Specialized Mental Health Rehabilitation Act of 2013.

2. Mark the Statement that Applies

- ☐ 2a. On Jan 1, 2022 & Jan 1, 2023, I was the owner of record on the identified property.
- ☐ 2b. On Jan 1, 2022 & Jan 1, 2023, I had legal or equitable interest in a written instrument in the identified property.
- ☐ 2c. On Jan 1, 2022 & Jan 1, 2023, I had a leasehold interest in the identified property that was used as a single-family residence.

3. I am liable for paying real property taxes on the property identified.

4. Mark the Statement that Applies.

- ☐ 4a. In 2023, I am 65 years of age or older.
- ☐ 4b. My spouse passed away in 2023, and would have been 65 years of age or older.

5. The property identified is the only property for which I have applied for a Low-Income Senior Citizen's Assessment Freeze.

6. The amount reported in this form includes my income, my spouse's income, and income of all persons living in my household, and the total income for previous year is \$65,000 or less.

Marital Status as of Jan 1, 2023

Previous

Next

Illinois Driver's License or State ID

- You must attach at least one document in this category.

Current Attachments:

Filename	Size (kb)
----------	-----------

Attach more files for this category:

Select files...

Income Tax (complete federal return for all household members)

- You must attach at least one document in this category.

Current Attachments:

Filename	Size (kb)
----------	-----------

Attach more files for this category:

Select files...

Trust

If you recently placed your property into trust, please provide trust information.

Current Attachments:

Filename	Size (kb)
----------	-----------

Attach more files for this category:

Select files...

Previous

Cancel Filing

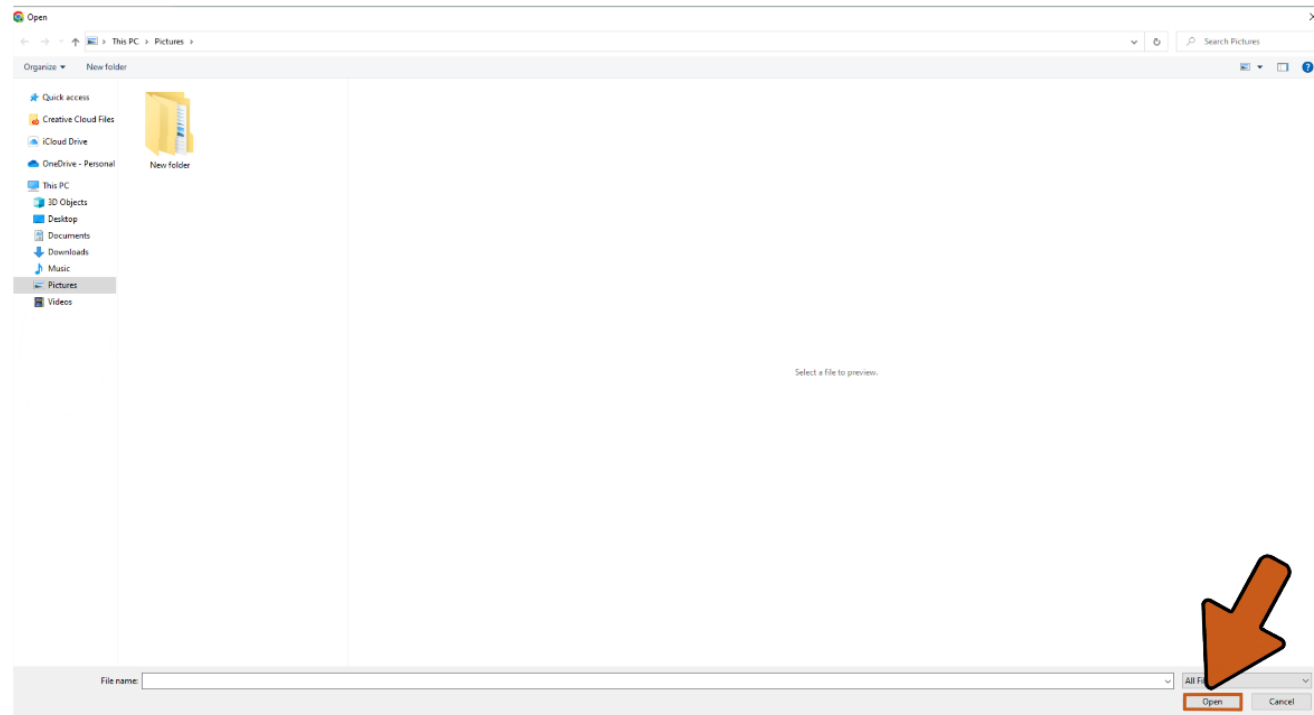
Next

After clicking → **“Select Files”** this pop-up will appear displaying your computer files. Select the appropriate pictures or scans and click → **Open**. Repeat until all needed documents are uploaded

→ Continue to the final submission page of the application by selecting **Next**

Select **Submit** and your application will be reviewed by Lake County and applied to your 2023 tax bill (payable in summer 2024). We recommend saving your login information, and printing a copy of your application after submission.

Your local assessor’s office is here to help, please reach out if any assistance needed. Thank you for using our services, and helping to support our community.



Verify Parcel Applicant Application Attachments **Submit**

Legal Notice

By clicking submit below, under penalties of perjury, I state that to the best of my knowledge, the information contained in this application including any attachment, is true correct and complete.

All submitted applications are subject to review in accordance with State law and the procedures of the Chief County Assessment Office of Lake County.

We recommend that you keep a copy of this application for your records.

****Note: Your filing is not submitted until you click 'Submit' below and receive a confirmation. If you click 'Print Draft', please be sure to close the print window and return to your filing to submit.**

If you receive a message that your filing cannot be submitted, please confirm that you have completed all required information; marked with a red asterisk(*):

- Uploaded all required attachments on the attachment tab
- Completed all tabs for required information

Previous Cancel Filing Print Draft **Submit**

Form PTAX-340 Step-by-Step Instructions

Charlie Mullin

Phone: 847-244-1101(Press 2)

Email: cmullin@warrentownship.net

17801 W. Washington Street

Gurnee, IL 60031

*Courtesy of Warren Township
Assessor's Office. Created by
Tiffany Lee, revised 2023*

Contents

Smartfile	1
Property Information	3
Household information ...	4
Income information	5
Attachments	6
Submission	7

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 2022

"Income" for this exemption means 2022 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 2022 income for you, your spouse, and **all** the other individuals living in the household.

As an alternative income valuation, a homeowner who is enrolled in any of the following programs may be presumed to have household income that does not exceed the maximum income limitation for that tax year: Aid to the Aged, Blind or Disabled (AABD) Program or the Supplemental Nutrition Assistance Program (SNAP), both of which are administered by the Department of Human Services; the Low Income Home Energy Assistance Program (LIHEAP), which is administered by the Department of Commerce and Economic Opportunity; The Benefit Access program, which is administered by the Department on Aging; and the Senior Citizens Real Estate Tax Deferral Program.

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.

4 of 4

- | | |
|--------------------|--|
| 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 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 2022, as allowed on U.S. 1040, Line 7 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 26. For example:

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

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, 2023. 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 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.

PTAX-340 (R-12/22)