This addendum must accompany any application renewal of the NYS Limited-Income Senior Exemption (RP-467). Due December 30, 2021

VILLAGE OF SPRING VALLEY

200 North Main Street Spring Valley, NY 10977 845-352-1100 Office of the Assessor

Rev. 2019.10.31

Additional Income Affidavit & IRA Disclosure Statement

New York State Real Property Tax Law (not the IRS Tax Code) defines "income" for the purpose of this property tax exemption. This addendum is a required part of The Village of Spring Valley Limited-Income Senior Exemption application process. It ensures that every applicant is asked about and provides a complete financial picture according to the New York State Real Property Tax Law (NYSRPTL) definition of "income". FAILURE TO PROVIDE THIS INFORMATION MAY RENDER YOUR APPLICATION (RP-467 OR RP-467-rnw) INCOMPLETE. Incomplete applications will be denied.

| Name of owner: | Name of additional owner: | | | |
|-------------------------------------|---------------------------|--|--|--|
| Age on 12/31/21: | Age on 12/31/21: | | | |
| Are you the only owner: [] Yes [] | No Relationship to owner: | | | |
| Property | Mailing | | | |
| Location: | Address: | | | |
| | () Same | | | |
| | as location | | | |

1. Are there any residents in the home other than the senior applicant(s) listed above? [] Yes [] No If Yes, please complete:

| Name | Relationship to Owner(s) | Age | Name of public school, if applicable |
|------|--------------------------|-----|--------------------------------------|
| | | | |
| | | | |
| | | | |

2. Do/does the applicant(s) have any non-taxable income, such as Pension Benefits, Railroad Retirement, Unemployment Benefits/or, alimony?

() No () Yes – Specify:

(Attach the annual earnings statement(s) from these income sources.)

Do you own any other residential real estate, in any state, including New York, for which you are receiving tax discounts and/or exemptions, based on your residency there? [] Yes [] No If yes, identify the address(es) below:

| STREET ADDRESS | TOWN/CITY | COUNTY | STATE | |
|----------------|-----------|--------|-------|--|
| | | | | |
| | | | | |

current 2020-21 addendum for rp 467 Village of Spring Valley Version.docx

- 4. If this is your <u>first senior application</u> for this property because you have recently purchased the property, please answer: [) check if not applicable
 Did you have limited-income senior exemption on your previous NY property? [) Yes [] No IF YES, provide the address and municipality:
- 5. For the purpose of this exemption, New York State Laws require that your IRA investments are treated the same as a savings account; that is, any amount withdrawn from the account(s) will be ignored but the earnings are considered income, even when you do not take any distribution. "Earnings" may be in the form of interest, dividends or capital gains. Documentation of earnings is required.

 Do you or your spouse have ANY Individual Retirement Accounts (IRA)?

 []
 Yes (please complete the following)

 []
 No (skip to the Certification below)

Indicate which types or IRA investments you have (including rollovers). Check all that apply and list them below (attach additional sheet(s) if necessary).

() Traditional () Roth Check here if invested in an annuity ()

IRA DISCLOSURE STATEMENT*

| Name of Financial Institution: | Account Number | Account Type | Name on Account | Earnings for 20_ |
|-----------------------------------|----------------|--------------|-----------------|------------------|
| | | | | \$ |
| | | | | \$ |
| | | | | \$ |
| | | | | \$ |
| | | | | \$ |
| | | | | \$ |

*Please note: you must list all IRA investments even if you are not currently taking distributions.

Certification:

UNDER PENALTY OF PERJURY, I/we swear that I/we have listed every **Individual Retirement Account** and have included the earnings statements for all IRA investments. **I have disclosed all other information** including, but not limited to, non- taxable interest income, capital gains, alimony, business and/or commissions, rental income, insurance disability income, veteran's disability income, workers' compensation, unemployment payments, etc.

And, UNDER PENALTY OF PERJURY, I/we swear that the residence indicated on the front of this form is my/our Primary Residence.

Signature: _____

Signature:

Date:

| Date: | | | | |
|--------|--|--|--|--|
| L 19Te | | | | |
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Failure to return this completed addendum will result in denial of exemption.