

Low-Income Senior Freeze Exemption Guide 2026

Courtesy of Warren Township Assessor's Office

Assessor, Charlie Mullin
17801 W. Washington Street
Gurnee, IL 60031
847-244-1101 x2
warrentownship.net/assessor

Required paperwork

- * Government ID
- * 2025 federal income tax return forms, including all additional 1040 schedules & attachments
- * Trust documentation (if applicable)

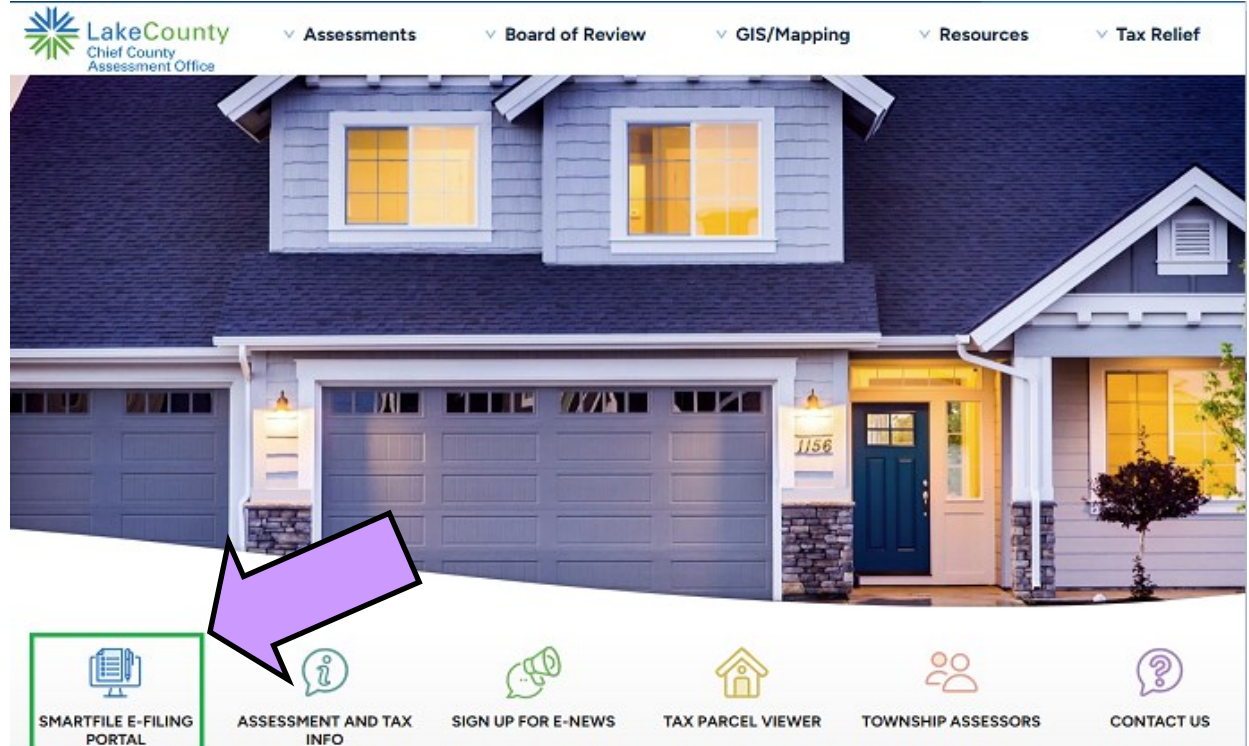
Before starting an application

All individuals residing in household (including spouses, adult children, or roommates) must submit full 2025 federal income forms. All forms and documentation used to complete application are required to be uploaded as a photo or scan.

We recommend using a desktop computer rather than a mobile device. For assistance, please contact your local Assessor's Office.

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

➡ Next, select the **Smartfile E-file Portal**



Enter your Lake County login information, or create an account. Be sure to save your login information for future use!

➡ Select **Login**

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

➡ Select **Begin Filing**

Login

Email

Password

Login

[Guest Login](#)

[Forgot password?](#)

[New user? Create an account](#)

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 Dead Dates" on the left-hand side.

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 (if filing for tax year 2025) or \$75,000 or less (if filing for tax year 2026). The deadline for filing is July 31st, to affect the tax bill issued the following May.

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 (if applying for tax year 2025) or \$75,000 or less (if applying for tax year 2026).

Begin Filing



Select tax year 2026

Search by PIN OR property address

*TIP– keep your search criteria simple!

For PIN, be sure your PIN does not have any hyphens or spaces.

For address, only use your house number and street name. Do not include the street direction or suffix.



Select Search



Confirm the correct property, then select Start Filing



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

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

Owner Name:

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

Add household information for each individual living on the property



Select "Add" for each person



Once everyone living on the property has been accounted for, including yourself, 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 to highlight it in blue before filling out the Applicant Information section. All household members must be included. Your spouse must be included (whether they live with you or not).

Add Delete

#	Household Member
1	

1 - 1 of 1 items

Applicant Information

Household Member's Name:

Address:
Apt., Unit No.
City, State Zip

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 **Next**

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 depending on the type of income tax forms filed. As a reminder, all individuals living in household must be included.

For the purpose of this guide we will be using a basic 1040-SR, but some applicants may require additional income documents. Keep an eye out for any additional income forms such as form 8829, 1099R, 1040 Schedule 1, C, D, E, F, and any statements referenced on Schedule 1.

All forms used must be included in attachments on page 7

Located on page 9 is the “need help?” step by step instructions

Example key

1. Smartfile application question		1.	Line #
Form ____	#	#	\$


Needed income form(s)


Amount to include from income form

-  = 1040-SR
-  = Schedule 1
-  = Additional income forms

1. Social Security and SSI Benefits. Include Medicare deductions:		1.	Line 6A
Form 1040-SR (2023)	6a Social security benefits .	6a	6b Taxable amount . . 6b
2. Railroad Retirement Benefits. Include Medicare Deductions:		2.	Total from 1099
Form 1099-R			
3. Civil Service Benefits:		3.	Total from 1099
Form 1099-R			
4a. Annuity Benefits(See instructions for Line 4):		4a.	Gross amount 1099
Form 1099-R			

= 1040-SR
 = Schedule 1
 = Additional income forms

4b. Federally Taxable pensions and retirement plan distributions:		4b.	Line 4B+5B *	
Form 1040-SR (2023)	4a IRA distributions . . .	4a	b Taxable amount . .	4b
	5a Pensions and annuities	5a	b Taxable amount . .	5b
*4b.) If you have received annuities, subtract the taxable annuity amount (form 1099-R)				
5. Human Services and other governmental case public assistance:		5.	See "need help?"	
6. Wages, Salaries, and tips from work:		6.	Line 1Z	
Form 1040-SR (2023)	z Add lines 1a through 1h		1z	
7. Interest and dividends received:		7.	Line 2A+2B+3B	
Form 1040-SR (2023)	2a Tax-exempt interest .	2a	b Taxable interest . .	2b
	3a Qualified dividends . .	3a	b Ordinary dividends .	3b
8. Net Rental, farm, and business income (loss). (See instructions for line 8):		8.	Line 3+5+6 *	
SCHEDULE 1 (Form 1040)	3 Business income or (loss). <u>Attach Schedule C</u>		3	
	5 Rental real estate, royalties, partnerships, S corporations, trusts, etc. <u>Attach Schedule E</u> .		5	
	6 Farm income or (loss). <u>Attach Schedule F</u>		6	
*8.) Do not include net operating loss (NOL)				

9. Net Capital gain or (loss). (See instructions for Line 9):

9.

Line 7+ (SH1) Line 4*

Form 1040-SR (2023)

SCHEDULE 1
(Form 1040)

SCHEDULE D
(Form 1040)

- 7 Capital gain or (loss). Attach Schedule D if required. If not required, check here ☐
- 4 Other gains or (losses). Attach Form 4797

7	
4	

*9.) -Add schedule D (unless marked as not required)
-Do not include net operating loss (NOL)

10. Other income or (loss). (See instructions for Line 10):

10.

Line 1+2A+7+9 *

SCHEDULE 1
(Form 1040)

- 1 Taxable refunds, credits, or offsets of state and local income taxes
- 2a Alimony received
- 7 Unemployment compensation
- 9 Total other income. Add lines 8a through 8z

1	
2a	
7	
9	

*10.) Do not include net operating loss (NOL)

12. Certain Subtractions. You may subtract only the reported adjustment to income from US 1040, Schedule 1, Part 2:

12a. Subtraction Item A:

All items included on line 26

Amount:

12b. Subtraction Item B:

Amount:

SCHEDULE 1
(Form 1040)

- 26 Add lines 11 through 23 and 25. These are your **adjustments to income**. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 10

26	
----	--

= 1040-SR

= Schedule 1

= Additional income forms

Continue to fill in appropriate selections



Select **Next**

Upload a photo or scan for the required fields

- * Government ID
- * 2025 federal income tax return forms, including all additional 1040 schedules & attachments
- * Trust documentation

ALL income form used during this application must be included



Click **Select Files**

(continue for more instructions)

Affidavit

1. Mark the Statement that Applies

- ☐ 1a. On Jan 1, 2025 & Jan 1, 2026, the property identified in this application was used as my principal residence.
- ☐ 1b. On Jan 1, 2025 & Jan 1, 2026, 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, 2025 & Jan 1, 2026, I was the owner of record on the identified property.
- ☐ 2b. On Jan 1, 2025 & Jan 1, 2026, I had legal or equitable interest in a written instrument in the identified property.
- ☐ 2c. On Jan 1, 2025 & Jan 1, 2026, 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 2026, I am 65 years of age or older.
- ☐ 4b. My spouse passed away in 2026, 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 if filing for tax year 2025; or \$75,000 or less if filing for tax year 2026.

Marital Status as of Jan 1, 2026

Previous

Illinois Driver's License or State ID

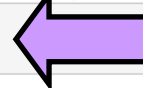
- You must attach at least one document in this category.

Current Attachments:

Filename	Size (kb)
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Attach more files for this category:

Select files...



Income Tax (complete federal return for all household members) or Enrollment in Assistance Program

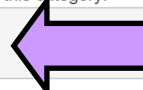
- You must attach at least one document in this category.

Current Attachments:

Filename	Size (kb)
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Attach more files for this category:

Select files...



Trust

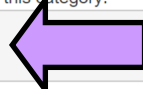
If you recently placed your property into trust, please provide trust information.

Current Attachments:

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

Attach more files for this category:

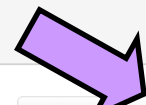
Select files...



Previous

Cancel Filing

Next





After clicking "Select Files" a pop-up will appear displaying your computer files. Select the appropriate pictures or scans and click **Insert**. Repeat until all needed documents are uploaded

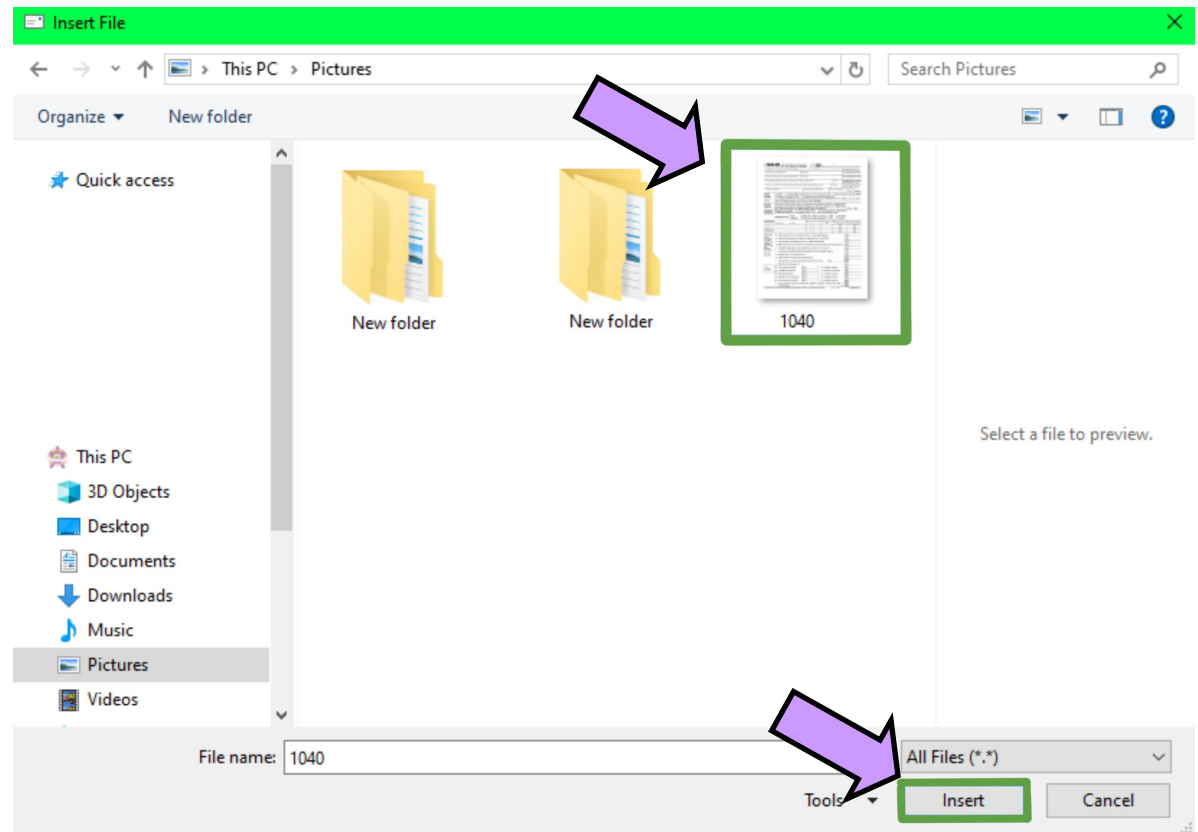


Continue to the final submission page of the application by selecting **Next**



Select **Submit**. Your application will be reviewed by Lake County and applied to your 2026 tax bill (payable in summer 2027). We recommend saving your login, 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**

Courtesy of Warren Township
Assessor's Office

Assessor, Charlie Mullin
17801 W. Washington Street
Gurnee, IL 60031
847-244-1101 x2
warrentownship.net/assessor
Revised 2026

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 2025

"Income" for this exemption means 2025 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 2025 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, Lines 4b and 5b). 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	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 2025, as allowed on U.S. 1040, Line 7a 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 | • alimony or maintenance paid |
| • Archer MSA deduction | • educator expenses |
| • student loan interest deduction | • deductible part of self-employment tax |
| • jury duty pay you gave to your employer | • self-employed health insurance deduction |
| • penalty on early withdrawal of savings | • health savings account deduction |
| • self-employed SEP, SIMPLE, and qualified plans | • moving expenses for members of the Armed Forces |

Line 13 – Total household income

Subtract Line 12 from Line 11. If this amount is greater than \$75,000, 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, 2026. 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.