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Name and Mailing Address

APN:  
SITUS:

**DISABLED VETERANS' EXEMPTION  
HOUSEHOLD INCOME WORKSHEET FOR CLAIM YEAR**

**Instructions for Low-income claimants only:** Compute your household income by entering the applicable dollar amounts for each of the itemized income categories below. Enter the total household income determined from Line 22 on Item 4 of BOE-261-G *Claim for Disabled Veterans' Property Tax Exemption*, and attach this worksheet to the claim when submitting to the Assessor.

**Household Income:** Revenue and Taxation Code section 20504 defines Household Income as all income received by all persons of a household while members of such household. Include only the income of persons who were members of the household during the calendar year prior to the year of this claim.

**GROSS INCOME FOR CALENDAR YEAR**

Must include taxable and non-taxable income

1. Wages, salaries, tips, other employee compensation
2. Social Security (including amount deducted for Medi-Care premiums)
3. Railroad Retirement
4. Interest and dividends
5. Pensions, annuities, disability retirement payments
6. SSI/SSP (Supplemental Security Income/State Supplemental Plan), AB (Aid to the Blind), ATD (Aid to Totally Disabled), AFDC (Aid to Families with Dependent Children), APSB (Aid to the Potentially Self-Supporting Blind)
7. Rental income (or loss)
8. Net income (or loss) from business
9. Income (or loss) from the sale of capital assets
10. Life insurance proceeds that exceed expenses
11. Veterans benefits received from the Veterans Administration
12. Gifts and inheritances in excess of \$300, except between members of household
13. Unemployment insurance benefits
14. Workers Compensation for **temporary** disability (not for permanent disability)
15. Amounts contributed on behalf of claimant to a tax sheltered or deferred compensation plan (also a deduction), see (c) below
16. Sick leave payments
17. Nontaxable gain from the sale of a residence
18. Income received by all other household members while they lived in the claimant's home during the last calendar year except a minor, student, or renter
19. TOTAL GROSS INCOME (Lines 1 through 18)

<b>COLUMN A</b> Yearly income of Veteran and Spouse	<b>COLUMN B</b> Yearly income of other household members
\$	\$

NAME: \_\_\_\_\_

APN: \_\_\_\_\_

CLAIM YEAR: \_\_\_\_\_

**Adjustments to income:** Section 17072 of the Revenue and Taxation Code provides for an adjusted gross income, which means, in the case of an individual, gross income minus the following deductions.

**DEDUCTIONS**

- (a) Forfeited interest penalty
  - (b) Alimony paid
  - (c) Individual retirement arrangement such as Keogh (HR 10), or Simplified Employee Plan (SEP) or SIMPLE plans
  - (d) Employee business expenses
  - (e) Moving expenses and deductions of expenses (already taken) for the production of income (or loss) reported in Items 7 (rental), 8 (business), and 9 (sale of capital assets) included in income
  - (f) Student loan interest
  - (g) Medical savings account
20. TOTAL DEDUCTIONS (Lines a through g)
21. TOTAL (Subtract Line 20 from Line 19)
22. HOUSEHOLD INCOME (Add Columns A and B)

COLUMN A	COLUMN B
\$	\$
\$	\$
\$	

**IMPORTANT: YOUR APPLICATION IS NOT COMPLETE WITHOUT THE CLAIM FORM. PLEASE SIGN PAGE 2 OF THE CLAIM AND RETURN WITH A COPY OF THIS INCOME STATEMENT.**

*In accordance with Revenue and Taxation Code section 441(d)(1), persons shall make available for examination information or records regarding his or her property in which the Assessor considers relevant and essential to the proper discharge of the Assessor's duties. Thus, the Assessor may request additional information or documents to support the income reported on this worksheet (i.e.) first page of IRS Form 1040, veteran's benefit or social security statement).*