Department of Taxation and Finance Office of Real Property Tax Services

RP-459-c-

# Instructions for Forms RP-459-c And RP-459-c-Rnw

Application and Renewal Application for Exemption For Persons with Disabilities and Limited Incomes

# **General information**

Real Property Tax Law section 459-c gives local governments and public school districts the option of granting a reduction in the amount of property taxes paid by qualifying persons with disabilities. To qualify, persons with disabilities generally must have certain documented evidence of their disability and meet certain income limitations and other requirements.

#### Eligibility

For the basic 50% exemption, the law allows each county, city, town, village, or school district to set the maximum income limit at any figure between \$3,000 and \$50,000.

Localities have the further option of giving exemptions of less than 50% to persons with disabilities whose incomes are greater than the local maximum. If a locality has adopted the \$50,000 income limit and the sliding-scale option, then a qualifying person with income less than \$58,400 may receive a 5%

Check with your local assessor for the income limits that are in

If more than one person owns the property, all owners **must** be persons with disabilities and qualify for the exemption. However, if the property is owned by a married couple or by siblings, only

Note: The property cannot receive an exemption both:

- under this law, and
- the senior citizens exemption (Real Property Tax Law, § 467) for the same municipal tax purpose.

However, where one or more owners qualify for exemption under this §, and the other owner qualifies for exemption under § 467, the owners may choose the more beneficial exemption.

# Where to file the application

File Form RP-459-c:

With:				
the sit.	For:			
the city, town or village assessor	partial exemption from city, town, and village property taxes.			
the city or town assessor who prepares the assessment roll used for county, school, or village taxes	partial exemption from county or school district taxes, or from village taxes in villages that do not assess property.			
the Nassau County Department of Assessment	exemption from county, town, or school taxes in Nassau County.			
the Tompkins County Division of Assessment	exemption from county, city, town, village, or school district taxes in Tompkins County.			

#### When to file

File the application in the assessor's office on or before the appropriate taxable status date, which, in most municipalities, is

- In Nassau County, the taxable status date is January 2.
- Westchester County towns have either a May 1 or June 1 taxable status date; contact the assessor.
- In cities, the date is determined from charter provisions. In NYC, the taxable status date is January 5, but applications for this exemption may be filed on or before March 15.
- The taxable status date for most villages that assess is January 1. Contact the village clerk for variations.

## Annual application

You must file Form RP-459-c by the taxable status date of the initial year to begin receiving the exemption. Each year thereafter, you must file Form RP-459-c-Rnw by the taxable status date to retain the exemption. The forms must be filed with your local assessor's office.

## Line instructions

## **Property information**

If the title to the property is in more than one name, list each name. See the deed or other proof of title to find the name of the

Note: If a person holds a life estate in the property, that person is the legal owner of the property. If the property is held in trust, the exemption may be allowed if the beneficiary of the trust qualifies. Answer all the questions based on the beneficiary's qualifications for the exemption. Attach a copy of the trust or other proof of such trustee-beneficiary relationship.

Municipalities which offer the exemption for persons with disabilities and limited incomes may also offer it to otherwise qualifying individuals who are tenant-stockholders of a cooperative apartment corporation. The percentage of the exemption to which the individual is entitled will be applied to the percentage of the total assessed value of the entire parcel that represents the tenant-shareholder's percentage of ownership of

Location of property should conform to its description on the latest assessment roll. Contact your assessor for assistance in

Line 1 – To be eligible, you must currently have a physical or mental impairment, not due to current use of alcohol or illegal drug use, which substantially limits your ability to engage in one or more major life activities, such as caring for yourself, performing manual tasks, walking, seeing, hearing, speaking, breathing, learning, or working. Briefly describe your impairment.

Line 2 - To be eligible, you must submit one of the following:

- An award letter from the Social Security Administration of your entitlement to social security disability insurance or supplemental security income (SSI);
- An award letter from the Railroad Retirement Board of your entitlement to railroad retirement disability benefits;

- A certificate from the New York State Commission for the Blind stating you are legally blind;
- An award letter from the United States Postal Service certifying your disability pension; or
- An award letter from the United States Department of Veterans Affairs certifying your disability pension.

Mark an **X** next to the documentary evidence you have attached to this application. If the letter or certificate indicates that your disability is permanent, you will not need to resubmit your evidence of disability in future years if you reapply.

Line 3 – You must provide proof of ownership of the property for which the exemption is requested. Such proof might consist of a copy of the deed by which the title was acquired, or a copy of a mortgage agreement or other document indicating that the title is vested in you. You do not have to resubmit this proof in future years unless your assessor requests it.

Lines 4a through 5 – The property must be the legal residence of, and must be occupied by, the person with the disability, unless such person is absent from the property while receiving health related services as an inpatient of a residential healthcare facility. A residential healthcare facility is a nursing home or other facility that provides or offers lodging, board, and physical care including, but not limited to, the recording of health information, dietary supervision, and supervised hygienic services. The property for which the exemption is requested also must be used exclusively for residential purposes. However, if a portion of the property is used for other than residential purposes, the exemption will apply only to the portion used exclusively for residential purposes.

Lines 6 through 10 – The exemption cannot be granted if the income of the owner, or the combined income of all of the owners, for the applicable income tax year exceeds the maximum income limit set by the locality. If the owner is married, the income of the spouse must be included in the total unless the spouse is absent from the residence due to a legal separation or abandonment. The income of a non-resident former spouse, who retains an ownership interest, is not included. Contact the assessor to determine the locally applicable income limits.

In localities where the taxable status date is **before** April 15, the applicable income tax year is two years prior to the current calendar year. In localities where the taxable status date **is on or after** April 15, the applicable income tax year is the most recent calendar year. However, for taxpayers who file **fiscal year** income tax returns, the applicable income tax year is the fiscal year shown on their most recent return. If no return has been filed, the applicant's income is to be determined using the amounts that would have been reported if a return had been filed.

The following taxing jurisdictions have taxable status dates of April 15 or later:

City of Dunkirk in Chautauqua County
City of Elmira in Chemung County
City of Geneva in Ontario County
City of Glen Cove in Nassau County
City of Oneida in Madison County
Cities of Rome and Utica in Oneida County
Cities of Mount Vernon, New Rochelle, Peekskill, and Rye in Westchester County
All towns in Westchester County
Villages of Harrison and Scarsdale in Westchester County
- Joanney

If any owner, or the spouse of any owners, filed a federal income tax return for the applicable income tax calendar year, a copy of the return must be submitted with the application. If you do not have a copy of the federal income tax return, it may be obtained from the District Office of the Internal Revenue Service (IRS) in which the return is filed. For more information, visit www.irs.gov.

If you need to request a copy of your previously filed return from the IRS, you may still file your application with your assessor, if you provide the copy of the return to your assessor as soon as you receive it from the IRS.

If an owner, or spouse of an owner is not required to file a federal income tax return, complete and attach Form RP-459-c-Wkst.

Income is defined as the federal adjusted gross income (FAGI) as reported on the applicant's federal form 1040 tax return(s) and subject to the following revisions:

- Social Security benefits not included in the applicant's FAGI are considered income, except where a locality has opted to exclude them from income.
- Distributions from an individual retirement account or individual retirement annuity included in the applicant's FAGI are not considered income, except where a locality has opted to include them in income.
- Medical and prescription drug expenses of an owner that were actually paid for and not reimbursed or paid by insurance may be deducted from income where a locality has opted to allow them to be deducted.
- If an owner with a disability is an inpatient in a residential health care facility, the amount paid for care at the facility by that owner (or by that owner's spouse, sibling, or co-owner) may be deducted from income.
- Any tax-exempt interest or dividends that were not included in the applicant's FAGI is considered income.
- The net amount of loss claimed on federal Schedule C, D, E, F, or any other separate category of loss cannot exceed \$3,000, and the total amount of all losses claimed cannot exceed \$15,000.

Note: As there are various adjustments to income regarding eligibility for this exemption, some of which are subject to local option by your taxing jurisdictions (municipality, school district, and county), you will **not** be computing your income on Forms RP-459-c or RP-459-c-Rnw. Enter the FAGI obtained from the relevant tax return on lines 7 through 7c, or enter the income from line 8 of the worksheet on line 8 of Form RP-459-c. The assessor will determine your income after applying the adjustments available in your taxing jurisdictions.

Lines 11 through 11b – If any child, including a child of tenants or leaseholders, resides on the property for which an exemption from school taxes is requested, and such child attends any public school (grades Pre-K through 12), no exemption from school taxes may be granted unless the school district in which the property is located has adopted a resolution to permit a school tax exemption for otherwise eligible residential property where children attending public school reside. The child may not have been brought into the residence in whole or in substantial part for the purpose of attending a particular school within the



Department of Taxation and Finance Office of Real Property Tax Services

RP-459-c

# Application for Exemption for Persons with Disabilities and Limited Incomes

For help completing this application, see Form RP-459-c-l, *Instructions for Forms RP-459-c and RP-459-c-Rnw*. You must file this application with your local assessor by the taxable status date. Do **not** file this form with the Office of Real Property Tax Services.

Mailing address of owner(s) (number	None de la constante de la con	
(a) (numbe	anu street or PO Box)	Location of property (street address)
City, village, or post office		street address)
	State ZIP code	City, village, or post office
Daytime contact number		State ZIP code
	Evening contact number	School district
mail address		- or district
		Tax map number of goodies &
lame(s) of any non-owner spouse(		Tax map number of section/block/lot: Property identification (see tax bill or assessment
•		- Contain
ddress(es) of primary residences(s	A if no	
, residences(s	i) if different from above:	
1 Describe the		
such as walking	of your physical or mental impair	ment which substantially limits one or more major life activities
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Award letter from the	mental security income (SSI)	ocument(s) submitted with your application as proof of your of your entitlement to social security disability
Award letter from the Certificate from the Award letter from the Award letter from the Award letter from the Mark an X in the approvate instructions):  Deed Mortga	mental security income (SSI) Railroad Retirement Board of your York State Commission for the United States Postal Service of United States Department of Verbriate box(es) to indicate the document of the Commission for the United States Department of Verbriate box(es) to indicate the document of United States Department of Verbriate box(es) to indicate the document of United States Department of Verbriate box(es) to indicate the document of United States Department of United States Department of Verbriate box(es) to indicate the document of United States Department of United Sta	of your entitlement to social security disability  your entitlement to railroad retirement disability benefits [  the Blind stating you are legally blind
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	6 Did the owner or spouse file a federal income tax return for the applicable income (see instructions to determine the applicable income tax year)	tax ye	ear?
	If Yes, attach a copy of such return (if you did file a return or returns for the applicable but do not have a copy, see the instructions).	incom	ne tax year,
•	<ul> <li>If No, complete Form RP-459-c-Wkst, Income Worksheet for Exemption for Pers Disabilities and Limited Incomes. Any spouse or owner completing Form RP-459 skip questions 7 through 7c.</li> <li>7 List the federal adjusted gross income (FAGI) of each owner and the spouse of eat tax year. Attach additional sheets if necessary. (See instructions to determine the each</li> </ul>	-c-Wk	st should
	tax year. Attach additional sheets if necessary. (See instructions to determine the appl	icable	income tax year.)
	FAGI of Owner(s)		
	Name of owner(s)		<b>B</b> FAGI
		····	
7a	Total FAGI of owner(s) (add column B)	7a	
•	FAGI of Spouse(s) Who Are Not Owners	1	
	A  Name of spouse(s) if not owner of property		В
		<del></del>	FAGI
	Total FAGI of spouse(s) (add column B)	7b	
7с	Total FAGI of owner(s) and spouse(s) (add lines 7a and 7b)	7c	
8	Enter total income from Form RP-459-c-Wkst, line 8. Enter 0 if not applicable	8	
9	If a deduction for unreimbursed medical and prescription drug expenses is authorized by any of the municipalities in which the property is located (see instructions), enter the unreimbursed medical and prescription drug costs (deduct any amounts reimbursed by insurance).		
	Table 1 amounts remibursed by insurance)	9	
10	Of the income specified on line 7c or line 8 how much, if any, was used to pay for an owner's care in a residential health care facility? Attach proof of amount paid: enter 0 if not applicable (see instructions)		
	paid; enter <b>0</b> if not applicable (see instructions.)	10	

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Note: There are various adjustments to income r are subject to local option by your taxing jurisdict determine your income after applying the adjustment of the property of th	lente ovoilale:	otion. Some of the a t, and county). The	2024) Page 3			
TE DOES a child (or oblide).		iodictions.				
attend a public school, grades Pre-K through 12?  If Yes, complete lines 11a and 11b.  If No, skip to Certification.		······	Yes No			
11a List the name(s) and location(s) of each school:						
11b Was the child (or were the children) brought into the part, for the purpose of attending a particular school	e residence in whole, or in subsol within the school district?	stantial	∕es			
Certification  (we) certify that all statements made on this application  Signature						
Signature (If more than one owner, all must sign)	Marital status	Phone number	Date			
•						
			-			
For Asses	sor's Use Only					
Date application filed	Evomption					
Proof of disability submitted	Exemption applies to taxes levied by or for:					
Proof of ownership submitted	Town%	. [				
Proof of income submitted	County%					
Application approved	School%	. [				
Application denied	Village%					
	City%					
sor's name			•			
		Date				