

MCL 211.7u Poverty Exemption Taxpayer Fact Sheet

MCL 211.7u provides for a property tax exemption, in whole or part, for the principal residence of persons who, by reason of poverty, are unable to contribute to the public charges. For purposes of the poverty exemption, the term "principal residence" means how principal residence exemption and qualified agricultural property are defined in MCL 211.7dd. The exemption does not apply to property of a corporation. This Taxpayer Fact Sheet includes updates made to MCL 211.7u by Public Act 253 of 2020.

How To Apply For The Poverty Exemption

To request a poverty exemption, a taxpayer must file:

- 1. Form 5737 Application for MCL 211.7u Poverty Exemption
- 2. Form 5739 Affirmation of Ownership and Occupancy to Remain Exempt by Reason of Poverty
- 3. All required additional documentation (such as federal/state income tax returns)

Forms 5737 and 5739, along with any additional documentation, must be filed with the local assessing unit where the property is located. **Do not file these forms with the Department of Treasury or the State Tax Commission.** The forms may be submitted to the local assessing unit on or after January 1 but before the day prior to the last day of the December Board of Review during the year in which the exemption is requested.

Taxpayers should contact the local assessing unit directly to verify deadline dates for submission of the forms to ensure the application gets reviewed by a Board of Review during that calendar year.

In addition to filing Forms 5737 and 5739 and any supporting documentation, a taxpayer must do all the following to be eligible for the poverty exemption:

- 1. Own and occupy the property as a principal residence.
- 2. Provide federal and state income tax returns for the current or immediately preceding year, including any property tax credits, for all persons <u>residing in the principal residence</u> (disclosure of the income of an owner who is not residing in the principal residence is not required). Federal and state income tax returns are not required for a person residing in the principal residence if that person was not required to file a federal or state income tax return. Instead, Form 4988, Poverty Exemption Affidavit may be filed for all persons residing in

the residence who were not required to file federal or state income tax returns in the current or immediately preceding year.

- 3. Produce a valid driver license or other form of identification, if requested.
- 4. Produce a deed, land contract, or other evidence of ownership of the property, if requested.
- 5. Meet the federal poverty guidelines published in the prior calendar year in the Federal Register by the United States Department of Health and Human Services <u>or</u> alternative guidelines adopted by the local assessing unit. The alternative guidelines cannot provide income eligibility requirements less than the federal guidelines.
- 6. Meet the asset level test adopted by the local assessing unit.

Appeal Rights

An appeal of a decision of the March Board of Review is made by completing and submitting a petition to the Michigan Tax Tribunal no later than July 31 of the same year. A decision of the July or December Board of Review may be appealed by completing and submitting a petition to the Michigan Tax Tribunal within 35 days of the July or December Board of Review's decision. More information on how to file an appeal is available by contacting the Michigan Tax Tribunal. Information can also be viewed on the Michigan Tax Tribunal's website at https://www.michigan.gov/taxtribunal.

Application for MCL 211.7u Poverty Exemption

This form is issued under the authority of the General Property Tax Act, Public Act 206 of 1893, MCL 211.7u.

MCL 211.7u of the General Property Tax Act, Public Act 206 of 1893, provides a property tax exemption for the principal residence of persons who, by reason of poverty, are unable to contribute toward the public charges. This application is to be used to apply for the exemption and must be filed with the Board of Review where the property is located. This application may be submitted to the city or township the property is located in each year on or after January 1.

To be considered complete, this application must: 1) be completed in its entirety, 2) include information regarding all members residing within the household, and 3) include all required documentation as listed within the application. Please write legibly and attach additional pages as necessary.

PART 1: PERSONAL INFORMATION — Petitioner must list all required personal information.									
Petitioner's Name				· · · · · · · · · · · · · · · · · · ·	Daytime Phone	Daytime Phone Number			
Α	D ("	14 11 101 1			l l l				
Age of Petitioner Marital Status				Age of Spouse	Nur	nber of Legal I	Dependents		
Proper	ty Address of Principal Residence			City		State	ZIP Code		
	Check if applied for Hor	mestead Pr	operty Tax Credit	Amount of Homestead Property Tax Credit					
PAR	T 2: REAL ESTATE INF	ORMATIO	N						
evid	List the real estate information related to your principal residence. Be prepared to provide a deed, land contract or other evidence of ownership of the property at the Board of Review meeting.								
Proper	ty Parcel Code Number			Name of Mortgage Company					
Unpaid	Balance Owed on Principal Resid	ence	Monthly Payment	Length of Time at this Residence					
Proper	ty Description								
PAR	T 3: ADDITIONAL PRO	PERTY INF	FORMATION						
List	information related to an	y other pro	perty owned by you	u or any member resid	ling in the h	ousehold.			
Check if you own, or are buying, other property. If che information below.				ecked, complete the Amount of Income Earned from other Pro			m other Property		
	Property Address			City		State	ZIP Code		
1									
!	Name of Owner(s)			Assessed Value	Date of Last Ta	xes Paid	Amount of Taxes Paid		
	Property Address			City		State	ZIP Code		
2	Name of Owner(s)			Assessed Value	Date of Last Ta	xes Paid	Amount of Taxes Paid		

PART 4: EMPLOYMENT	INFORMAT	TION -	— List your cu	urrent empl	oyment	inform	ation.		
Name of Employer									
Address of Employer			City	City				ZIP Code	
Contact Person				Employer	Telephone I	Number			
PART 5: INCOME SOURCE	CES								
List all income sources, in accounts), unemployment judgments from lawsuits, income, for all persons res	compensa alimony, ch	tion, c	disability, gove upport, friend	ernment pe	nsions, v	vorker	's compensa	tion, divi	dends, claims and
	Sourc	e of Ir	ncome		Monthly or Annual Income (indicate which)				
PART 6: CHECKING, SAV	/INGS ANI	O INV	ESTMENT IN	FORMATI	NC	<u> </u>			
accounts, postal savings,	List any and all savings owned by all household members, including but not limited to: checking accounts, savings accounts, postal savings, credit union shares, certificates of deposit, cash, stocks, bonds, or similar investments, for all persons residing at the property.								
Name of Financial Inst			Amount Con Deposit Inter			te Name on Accou		Value of Investment	
PART 7: LIFE INSURANCE	E — List a	ll poli	cies held by a	ll househo	d memb	ers.			
Name of Insured	Amount Policy	I	Monthly Payments	Policy Paid in Full N		Naı	Name of Beneficiary		Relationship to Insured
PART 8: MOTOR VEHICL	.E INFORM	IATIO)N						
All motor vehicles (including motorcycles, motor homes, camper trailers, etc.) held or owned by any person residing within the household must be listed.									
Make			Year		Monthly Payment		Balance Owed		
Ware					11.01	<u>y</u> 1			

PART 9: HOUSEHOLD O	CCUPANTS -	List all p	ersons li	ving i	in the househ	old.			
First and Last Name			Age		Relationship to Applicant Pl		e of E	Employment	\$ Contribution to Family Income
		.50		, ipplicant	1 145				
PART 10: PERSONAL DE	BT — List all	personal o	lebt for a	all ho	usehold meml	bers.			
			Dat						
Creditor	Purpose	of Debt	of De	bt	Original Bal	lance	Mont	hly Payment	Balance Owed
PART 11: MONTHLY EXP	ENSE INFOR	RMATION	<u>'</u>						
The amount of monthly exnecessary.	xpenses relat	ted to the p	orincipal	resid	lence for each	h cate	gory	must be listed	I. Indicate N/A as
Heating	Electric			Water	•			Phone	
Cable Food			Cloth		ing		Health Insurance		
Garbage		Daycare				Са	Car Expense (gas, repair, etc.)		
Other (type and amount)		Other (type ar	nd amount)			Otl	Other (type and amount)		
Other (type and amount)	Other (type ar	Other (type and amount)				Other (type and amount)			

NOTICE: Per MCL 211.7u(2)(b), federal and state income tax returns for all persons residing in the principal residence, including any property tax credit returns, filed in the immediately preceding year or in the current year must be submitted with this application. Federal and state income tax returns are not required for a person residing in the principal residence if that person was not required to file a federal or state income tax return in the tax year in which the exemption under this section is claimed or in the immediately preceding tax year.

PART 11: POLICY AND GUIDELINES ACKNOW	WLEDGMENT						
The governing body of the local assessing unit shall determine and make available to the public the policy and guidelines used for the granting of exemptions under MCL 211.7u. In order to be eligible for the exemption, the applicant must meet the federal poverty guidelines published in the prior calendar year in the Federal Register by the United States Department of Health and Human Services under its authority to revise the poverty line under 42 USC 9902, or alternative guidelines adopted by the governing body of the local assessing unit so long as the alternative guidelines do not provide income eligibility requirements less than the federal guidelines. The policy and guidelines must include, but are not limited to, the specific income and asset levels of the claimant and total household income and assets. The combined assets of all persons must not exceed the limits set forth in the guidelines adopted by the local assessing unit.							
The applicant has reviewed the applicable policy and guidelines adopted by the city or township, including the specific income and asset levels of the claimant and total household income and assets.							
PART 12: CERTIFICATION							
I hereby certify to the best of my knowledge that the information provided in this form is complete, accurate and I am eligible for the exemption from property taxes pursuant to Michigan Compiled Law, Section 211.7u.							
Printed Name	Signature	Date					

This application shall be filed after January 1, but before the day prior to the last day of the local unit's December Board of Review.

Decision of the March Board of Review may be appealed by petition to the Michigan Tax Tribunal by July 31 of the current year. A July or December Board of Review decision may be appealed to the Michigan Tax Tribunal by petition within 35 days of decision. A copy of the Board of Review decision must be included with the petition.

Michigan Tax Tribunal PO Box 30232 Lansing MI 48909

Phone: 517-335-9760

E-mail: taxtrib@michigan.gov

Attach a copy of 1040 federal or state income tax return for each person residing in the homestead, if filed for the current or preceding year. If you are not required to file a federal or state income tax return, you must sign a Poverty Exemption Affidavit. Failure to supply these documents could be an automatic denial of the application.

THORNAPPLE TOWNSHIP

POVERTY INCOME AND ASSET TEST GUIDELINES

Adopted by Township Board on June 12, 2023

To be eligible, a person shall do all the following on an annual basis:

- 1) Be an owner of and occupy as a homestead the property for which an exemption is requested.
- 2) File a claim with the supervisor or board of review, accompanied by federal and state income tax returns for all persons residing in the homestead, including any tax credit returns filed in the immediately preceding year or in the current year.
- 3) Produce a valid drivers' license or other form of identification if requested.
- 4) Produce a deed, land contract, or other evidence of ownership of the property for which an exemption is requested if requested.
- 5) The adopted guidelines shall not be set lower than the federal poverty income standards as defined and determined annually by the United States Office of Management and Budget.
- 6) The application for an exemption shall be filed after January 1, but before the day prior to the last day of board of review
- 7) Meet additional eligibility requirements as determined by the Township Board including: Asset ceiling (the words "asset ceiling" added for revision) to include one residence, two cars, one recreational vehicle, intangible assets, and savings less than 5000.00

POVERTY INCOME and ASSETS STANDARD

The following are the 2023 federal poverty guideline (at 125%) for use in setting poverty income and asset test standards for Thornapple Township applicants.

	Maximum Total Income (Federal)	Maximum Total Income (Township)				
_ 1	\$13,590	\$16,987.50				
2	\$18,310	\$22,887.50				
3	\$23,030	\$28,787.50				
4	\$27,750	\$34,687.50				
5	\$32,470	\$40,587.50				
6	\$37,190	\$46,487.50				
7	\$41,910	\$52,387.50				
8	\$46,630	\$58,287.50				
Each additional perso	n \$4,720	\$5,900				

See Poverty Income Guidelines and Asset Test on reverse side.

Thornapple Township Poverty Exemptions

According to the U.S. Census Bureau, "income" includes:

- Money, wages and salaries before any deductions.
- Net receipts from nonfarm self-employment. (These are receipts from a person's own business, professional enterprise, or partnership, after deductions for business expenses.
- Net receipts from farm self-employment. (With the same provisions as above).
- Regular payments from Social Security, railroad retirement, unemployment, worker's compensation, veterans' payments and public assistance.
- Alimony, child support, and military family allotments.
- Private pensions, government pensions, and regular insurance or annuity payments.
- College or university scholarships, grants, fellowships and assistantships.
- Dividends, interest, net rental income, net royalties, periodic receipts from estates or trusts, and net gambling or lottery winnings.

The value of the principal residence (home) does NOT have to be considered in the applicant's list of assets.

Listed below are possible examples of assets:

- A second home
- Land
- Vehicles
- Recreational vehicles (campers, motorhomes, boats, ATVs, snowmobiles, etc.)
- Buildings, other than the residence
- Jewelry
- Antiques
- Artwork
- Equipment
- Other personal property of value
- Money received from sale of property such as stocks, bonds, a house, or a car
- Withdrawals of bank deposits and borrowed money

Poverty Exemption Affidavit

This form is issued under authority of Public Act 206 of 1893; MCL 211.7u.

INSTRUCTIONS: When completed, this document must accompany a taxpayer's Application for Poverty Exemption filed with the supervisor or the board of review of the local unit where the property is located. MCL 211.7u provides for a whole or partial property tax exemption on the principal residence of an owner of the property by reason of poverty and the inability to contribute toward the public charges. MCL 211.7u(2)(b) requires proof of eligibility for the exemption be provided to the board of review by supplying copies of federal and state income tax returns for all persons residing in the principal residence, including property tax credit returns, or by filing an affidavit for all persons residing in the residence who were not required to file federal or state income tax returns for the current or preceding tax year.

I	, swear and affirm by my signature below that I
reside in the principal residence that is the	subject of this Application for Poverty Exemption and that ax year, I was not required to file a federal or state income
Address of Principal Residence:	
Signature of Person Maki	Affidavit Date

Affirmation of Ownership and Occupancy to Remain Exempt by Reason of Poverty

This form is issued under the authority of Public Act 253 of 2020.

This form is to be used to affirm ownership, occupancy, and income status. MCL 211.7u(2) provides that, to be eligible for exemption under this section, a person shall, subject to subsection (6) and (8), annually affirm that the applicant owns and occupies, as a principal residence, the property for which an exemption is requested.

PART 1: OWNER INFORMATION — Enter infor	mation for the perso	n owning and	d occupying the	he resid	ence.		
Owner Name			Owner Telephone Number				
Mailing Address	City	•		State	ZIP Code		
PART 2: LEGAL DESIGNEE INFORMATION (C	complete if applicable	e.)					
Legal Designee Name	· · · · · · · · · · · · · · · · · · ·		Daytime Telephone Number				
Mailing Address	City	<u> </u>		State	ZIP Code		
PART 3: HOMESTEAD PROPERTY INFORMAT	TION — Enter informa	ation for prope	rty in which the	exempt	ion is being claimed.		
City or Township (check the appropriate box and enter name) City Township Village			County	·	<u> </u>		
Name of Local School District							
Parcel Identification Number	Year(s) Exer	mption Previously	Granted by Board o	of Review			
Homestead Property Address	City			State	ZIP Code		
PART 4: AFFIRMATION OF OWNERSHIP, OCC	CUPANCY, AND INC	OME STATU	JS (Check all	boxes t	hat apply.)		
 I own the property in which the exemption is being claimed. □ The property in which the exemption is being claimed is used as my homestead. Homestead is generally defined as any dwelling with its land and buildings where a family makes its home. □ After establishing initial eligibility for the exemption, my income and asset status has remained unchanged and/or I receive a fixed income solely from public assistance that is not subject to significant annual increases beyond the rate of inflation, such as federal Supplemental Security Income or Social Security disability or retirement benefits. 							
PART 5: CERTIFICATION							
I hereby certify to the best of my knowledge that an exemption from property taxes by reason of							
Owner or Legal Designee Name (print)	Signature of Owner or Lega	l Designee		Da	ate		
Designee must attach a letter of authority.							
LOCAL GOVERNMENT I	JSE ONLY (DO NO	T WRITE BEI	OW THIS LI	NE)			
Approved Denied (Attach appeal instructions and provide to owner.)					l be posted to tax roll		
CERTIFICATION — I certify that, to the best of accurate.	f my knowledge, the	information	contained in	this forr	n is complete and		
Assessor Signature			Date Certified by A	Assessor			