

List of Supporting Documents and Instructions for completing application

Complete all sections on the front page and include supporting documents to avoid delays in the application process. If you have any questions, contact our office at 509-447-4312.

How combined disposable income is calculated

Per RCW 84.36.383(1) "combined disposable income" is your disposable income plus the disposable income of your spouse/domestic partner and any co-tenants, minus expenses for you or your spouse/domestic partner.

How disposable income is calculated

"Disposable income" has a specific definition for the purpose of this program. Per RCW 84.36.383(6), "disposable income" is adjusted gross income, as defined in the federal internal revenue code, plus all of the following that were not included in, or were deducted from, adjusted gross income:

- Capital gains, other than a gain on the sale of a principal residence that is reinvested in a new principal residence.
- Amounts deducted for losses or depreciation.
- Pension and annuities (This includes **L & I pensions**)
- Social security act and railroad retirement benefits.
- Military pay and benefits other than attendant-care and medical-aid payments.
- Veterans pay and benefits other than attendant-care, medical-aid payments, VA disability benefits, and DIC.
- Dividend receipts.
- Interest received on state and municipal bonds.

These incomes are included in "disposable income" **even when it is not taxable for IRS purposes.**

What are deductible expenses

Expenses paid by you or your spouse/domestic partner (not reimbursed or covered by insurance) for:

- Prescription drugs.
- Treatment or care of either person in the home or in a nursing home, boarding home, or adult family home.
- Health care insurance premiums for Medicare A, B, C and D.
- Premiums for Medicare supplemental policies (Medigap).

- Durable medical and mobility enhancing equipment and prosthetic devices.
- Medically prescribed oxygen.
- Long-term care insurance.
- Cost-sharing amounts (amounts applied to the health plans out of pocket maximum amount).
- Nebulizers
- Medicines of mineral, animal, and botanical origin if prescribed, administered, dispensed, or used in the treatment of an individual by a naturopath licensed in Washington.
- Ostomic items.
- Insulin for human use.
- Kidney dialysis devices.
- Disposable devices used to deliver drugs for human use.

Sign and Date the application

You are signing under oath acknowledging all information is true and accurate. You understand it is your responsibility to notify the county assessor if you have a change in circumstances.

List of Supporting Documents to include with application ↓ (New applications only) ↓

Proof of age or disability, ownership, and occupancy

Include copies of documentation showing you meet the age or disability, ownership, and occupancy requirements such as:

- A copy of your driver's license or state issued photo id.
- A copy of your voter registration
- A copy of your birth certificate
- If your eligibility is based on a disability: a copy of your disability award letter from SSA or VA, or a Proof of Disability statement completed and submitted by your physician.
- A complete copy of the trust documents, if applicable.
- A copy of your deed.
- Any other documents your county assessor requests.

PROOF OF INCOME

Federal Tax Forms

If you filed or will be filing a federal tax return, provide a complete copy including, but not limited to, all of the following forms or schedules that are part of your federal return.

- IRS Form 1040, 1040A, or 1040EZ
- Schedule B – Interest & Ordinary Dividends
- Schedule C – Profit & Loss from Business
- Schedule D – Capital Gains & Losses
- Schedule E – Supplemental Income & Loss
- Schedule F – Profit & Loss from Farming
- Form 1116 – Foreign Tax Credit
- Form 4797 – Sales of Business Property
- Form 6252 – Installment Sale Income
- Form 8829 – Expenses for Business Use of your Home
- Social Security Statement (Generally, SSA 1099)
- K-1's

Other Documents

Include copies of standard federal forms and documents used by others to report income they paid out including, but not limited to, the following:

1. W-2's – Wage & Tax Statement
W-2-G – Certain Gambling Winnings
2. 1099's:
 - 1099-B – Proceeds from Broker & Barter Exchange
 - 1099-Div – Dividends & Distributions
 - 1099-G – Unemployment Compensation, State & Local Income Tax Refunds, Agricultural Payments
 - 1099-Int – Interest Income
 - 1099-Misc – Contract Income, Rent & Royalty Payments, Prizes
 - 1099-R – Distributions from Pensions, Annuities, IRA's, Insurance Contracts, Profit Sharing Plans
 - 1099-S – Proceeds from Real Estate Transactions
 - RRB-1099 – Railroad Retirement Benefits
 - SSA-1099 – Social Security Benefits

Non-IRS Filers

- If you do not file an IRS return, you must provide documentation of all income received by you, your spouse/domestic partner, and any co-tenants.

Other Income Source

If you have income from other sources and you did not receive a W2 or 1099 for the income you received, provide the following:

- a statement from the organization that issued the payments (DSHS, WA Labor & Industries, U.S. Dept. of Labor (OWCP), etc.);
- copies of your monthly bank statements with a statement describing the type of income received (e.g. worker's compensation, state cash and food assistance, tips, cash earned from yard sales or odd jobs, rental income, groceries purchased for you in return for a room in your house, etc.).

PROOF OF EXPENSES / DEDUCTIONS

Provide documentation for all allowable out-of-pocket expenses that were not reimbursed by insurance or a government program. **Proof may be as follows:**

- Copy of an invoice, bill or cancelled check
- Pharmacy summary printouts
- Medicare Parts A, B, C or D (SSA-1099 statement)
- Medicare Supplemental insurance – copy of statements identifying insurance company, plan number and premiums paid.

Copy of receipts or invoices for any of the following amounts entered:

- Equipment, mobility enhancing equipment and prosthetic devices.
- Medically prescribed oxygen
- Long-term care insurance premiums.
- Cost-sharing – coverage summary that identifies the amount of out-of-pocket maximum incurred.
- Nebulizers
- Ostomic items
- Insulin for human use.
- Kidney dialysis devices.
- Disposable devices.



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Questions?

Please call our office at **509-447-4312**