



**SAUSALITO MARIN SCHOOL DISTRICT
 MEASURE G PARCEL TAX – FISCAL YEAR 2025-26
 LOW-INCOME SENIOR, SSI, AND SSDI
 EXEMPTION APPLICATION FORM**

The tax is \$0.15 per building square foot, up to a maximum of 23,000 square feet. For example, the annual cost to a property owner for a 1,000 sq ft home would be \$150. The annual cost for a 2,500 sq ft home would be \$375. The tax is capped for buildings larger than 23,000 sq ft. The tax will be assessed starting July 1, 2025. Please visit www.smusd.org to see a tax calculator that can estimate your tax. There is no escalation clause in the tax. It will not increase each year.

Applications are due by May 30 of the fiscal year.

Measure G Parcel Tax Exemptions Available:

- **Low-Income Senior Exemptions:** Property owners who attain 65 years of age prior to June 30 of the tax year

Persons in Family/Household	Annual: 2024 FMR	Month: 2024 FMR
Efficiency	\$27,504	\$2,292
One-Bedroom	\$33,816	\$2,818
Two-Bedroom	\$40,308	\$3,359
Three-Bedroom	\$46,944	\$3,912
Four-Bedroom	\$53,676	\$4,473

- **Supplemental Security Income (SSI)/Social Security Disability Insurance Benefits (SSDI):** Property owners receiving SSI or SSDI, regardless of age. SSDI recipient's yearly income does not exceed 250% of the 2012 federal poverty guidelines issued by the United States Department of Health and Human Services as shown below:

2012 Poverty Guidelines for the 48 Continuous States and District of Columbia

Persons in Family/Household	Annual: 250% of 2012 Guidelines	Month: 250% of 2012 Guidelines
1	\$31,900	\$2,327
2	\$43,100	\$3,152
3	\$54,300	\$3,977
4	\$65,500	\$4,802

How to Apply for the Measure G Exemption:

Complete the Measure G Exemption Application and include the following documentation (copies only).

- **Ownership Verification:** A current Property Tax Bill indication your ownership of the property
- **Age Verification:** A valid California Driver's License or Identification Card or Passport
- **Occupancy Verification:** A current utility bill (electric or cable) in applicant's name with service address
- **(SSI/SSDI only) Benefits Verification Letter:** A current Benefits Verification Letter may be obtained by calling the Social Security Administration at (800)772-1213

Once you receive the SSI/SSDI exemption, you are required to provide an updated benefits verification letter annually to continue to receive the exemption.

If you have questions about this form, please call the Parcel Tax Administrator at (844) 332-0549 or email: OAPSupport@sci-cg.com.



**Sausalito Marin City School District
Measure G Parcel Tax
Low-Income Senior Application**

Filing Deadline for the exemption to take place for the next fiscal year is May 30th, see application requirements.

Assessor's Parcel Number: _____		
Owner Name(s): _____		
Last Name	First Name	Initial
_____	_____	_____
Last Name	First Name	Initial
_____	_____	_____
Street Address _____		
_____	_____	_____
City	State	Zip
_____	_____	_____
_____	_____	_____
Telephone Number	Email Address*	
* SCI Consulting Group will send an email on or before July to let you know that the application has been reviewed and approved.		

Is the address your principal place of residence? YES NO
I declare under the penalty of perjury the foregoing is true and correct.
 Are you the new owner of the property? YES

Owner signature _____	Date _____
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Please attach a current copy of your ownership, residence, age documentation and income documentation.

- Ownership: Current property tax bill
- Residence: Current utility bill (electric or cable)
- Age: Identification (Driver's License, ID, or Passport)
- Income: Supporting documentation of income (see application requirements)

Additional documentation may be required to determine eligibility

For more information regarding the exemption process, please check our website at www.smcsd.org or call our parcel tax administrator: SCI Consulting Group 1-844-332-0549



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LOW-INCOME SENIOR, SSI, AND SSDI
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Sausalito Marin City School District Measure G Parcel Tax SSI / SSDI Application

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Assessor's Parcel Number: _____		
Owner Name(s): _____		
Last Name	First Name	Initial
_____	_____	_____
Last Name	First Name	Initial
_____	_____	_____
Street Address _____		
_____	_____	_____
City	State	Zip
_____	_____	_____
Telephone Number _____		Email Address* _____

* SCI Consulting Group will send an email on or before July to let you know that the application has been reviewed and approved.

Is the address your principal place of residence? YES NO
I declare under the penalty of perjury the foregoing is true and correct.
Are you the new owner of the property? YES

Owner signature _____ Date _____

Please attach a current copy of your ownership, residence, age documentation and income documentation.

- Ownership: Current property tax bill
- Residence: Current utility bill (electric or cable)
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- Income for SSDI: Supporting documentation of income (see application requirements)

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