

**ALAMEDA UNIFIED SCHOOL DISTRICT**  
**MEASURE B1 AND MEASURE A - EXEMPTION INFORMATION**  
**SENIOR / SSI / SSDI EXEMPTION APPLICATION FOR FY 2024-25**

<b>Measure B1</b>	<b>Measue A</b>
<b>Supports:</b> small class sizes; neighborhood schools; high school athletics; music, PE, and media centers in elementary schools; fine arts classes in high schools; innovative programs; and attracting and retaining excellent teachers.	<b>Supports:</b> attract and retain excellent teachers and employees; sustain strong instruction in core academic programs; support teachers and counselors to help support students; attract teachers in hard-to-fill areas; and help teachers and counselors prepare students for career choices
<b>Duration:</b> July 1, 2018 - June 30, 2025	<b>Duration:</b> July 1, 2020 - June 30, 2027
<b>Rate:</b> \$299 per unimproved parcel; \$0.32 per building area sqft with a max rate of \$7,999 per parcel	<b>Rate:</b> \$299 per unimproved parcel; \$0.265 per building area sqft with a max rate of \$7,999 per parcel

**Measure B1 and Measure A Parcel Tax Exemptions available for owner-occupied primary residences:**

- **Senior Exemption:** Property owners who attain 65 years of age prior to July 1 of the upcoming fiscal year.
- **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 United States Dept of Health and Human Services as shown below:

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

Persons in Family/ Household	Annual: 250% of 2012 Guideline	Month: 250% of 2012 Guideline
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 B1 and Measure A Parcel Tax Exemption:**

- **Complete the Exemption Application and include the following documentation (copies only):**
  - Proof of ownership (current property tax bill)
  - Proof of residence (utility bill in applicant’s name with service address)
  - Proof of birth date (driver’s license, birth certificate, or passport)
  - Benefits verification Letter (**SSI/SSDI only**): A current Benefits Verification Letter may be obtained by calling the Social Security Administration at (800) 772-1213.
- **Submit the signed application with copies of eligibility documentation no later than June 30, 2024:**
  - **Mail:** Alameda USD Exemptions, 4745 Mangels Blvd, Fairfield, CA 94534
  - **Email or Fax:** AlamedaUSDexe@sci-cg.com or (707) 430-4319

If you received an exemption in 2023-2024 or prior to and are still the homeowner and currently reside at the same address, you **do not** need to renew your tax exemption. If you sold your home and purchased a new home, you must re-file for an exemption for the new property.

If you have questions about this application, please call the Parcel Tax Administrator, SCI Consulting Group, at (844) 332-0549, or email [AlamedaUSDexe@sci-cg.com](mailto:AlamedaUSDexe@sci-cg.com).

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To qualify for an exemption, the applicant must own and occupy the property as a primary residence. Please complete the application to be request an exemption from Measure B1 and/or Measure A.

\_\_\_\_\_  
Assessor's Parcel Number:

\_\_\_\_\_  
Name (Last, First):

\_\_\_\_\_  
Date of Birth:

\_\_\_\_\_  
Property Address:

\_\_\_\_\_  
City:

\_\_\_\_\_  
Telephone Number:

\_\_\_\_\_  
Email Address (Optional):

**Is the address your principal place of residence?** Yes \_\_\_\_\_ No \_\_\_\_\_

**I claim exemption from (check all that apply):** Measure B1 \_\_\_\_\_ Measure A \_\_\_\_\_

**I claim the exemption:** \_\_\_\_\_ Senior (65 years of age prior to July 1 of the upcoming fiscal year)

\_\_\_\_\_ SSI

\_\_\_\_\_ SSDI (Applicant must meet income requirement.)

*Under penalty of perjury, I hereby declare that this application for exemption and the accompanying verifications of residence and birth date are true and correct to the best of my knowledge.*

\_\_\_\_\_  
**Signature of Applicant**

\_\_\_\_\_  
**Date**

*\*We may request additional documentation in order to determine eligibility.\**

**Submit the signed application with copies of eligibility documentation no later than June 30, 2024:**

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**Supporting documents to verify ownership, age, occupancy, and SSDI/SSI Benefits Letter, if applicable:**

**Ownership**

**Age** (Senior only)

**Occupancy**

**SSDI / SSI only**

\_\_\_\_ Current property tax bill

\_\_\_\_ Driver's License/ID

\_\_\_\_ Utility Bill

\_\_\_\_ Benefits Verification Letter

\_\_\_\_ Passport

Once approved for the exemption and continue to own and occupy the property as your main residence, you **do not** need to reapply for the exemption. The exemption will automatically be renewed. If you sell your home and purchase a new home, you must re-apply for the exemption for the new residence.

**If you have questions about this form, please contact the Parcel Tax Administrator by phone at (844) 332-0549 or email at [AlamedaUSDexe@sci-cg.com](mailto:AlamedaUSDexe@sci-cg.com).**