



MISSOURI DEPARTMENT OF REVENUE  
**PROPERTY TAX CREDIT**

**2009**  
FORM  
**MO-PTS**

Attachment Sequence No. 1040-07 and 1040P-01

<b>THIS FORM MUST BE ATTACHED TO FORM MO-1040 OR FORM MO-1040P.</b>				
<b>NAME</b>	LAST NAME	FIRST NAME	INITIAL	BIRTHDATE ____/____/____
	SOCIAL SECURITY NO. _____			
<b>QUALIFICATIONS</b>	SPOUSE'S LAST NAME	FIRST NAME	INITIAL	BIRTHDATE ____/____/____
	SPOUSE'S SOCIAL SECURITY NO. _____			
<p><b>You must check a qualification to be eligible for a credit. Check only one. Copies of letters, forms, etc., must be included with claim.</b></p> <div style="display: flex; justify-content: space-between;"> <div style="width: 48%;"> <input type="checkbox"/> A. 65 years of age or older <b>(Attach a copy of Form SSA-1099.)</b> </div> <div style="width: 48%;"> <input type="checkbox"/> C. 100% Disabled <b>(Attach a copy of the letter from Social Security Administration or Form SSA-1099.)</b> </div> </div> <div style="display: flex; justify-content: space-between;"> <div style="width: 48%;"> <input type="checkbox"/> B. 100% Disabled Veteran as a result of military service <b>(Attach a copy of the letter from Department of Veterans Affairs.)</b> </div> <div style="width: 48%;"> <input type="checkbox"/> D. 60 years of age or older and received surviving spouse benefits <b>(Attach a copy of Form SSA-1099.)</b> </div> </div>				
<b>FILING STATUS</b>		<input type="checkbox"/> Single <input type="checkbox"/> Married — Filing Combined <input type="checkbox"/> Married — Living Separate for Entire Year		
If married filing combined, you must report both incomes.				
<b>Failure to provide the attachments listed below (rent receipt(s), tax receipt(s), 1099(s), W-2(s), etc.) will result in denial or delay of your claim.</b>				
1. Enter the amount of income from Form MO-1040, Line 6, OR Form MO-1040P, Line 4. ....				1    00
2. Enter the amount of nontaxable social security benefits received by you and/or your minor children before any deductions and/or the amount of social security equivalent railroad retirement benefits. <b>Attach a copy of Form SSA-1099 and/or RRB-1099.</b> ....				2    00
3. Enter the total amount of pensions, annuities, dividends, rental income, or interest income not included in Line 1. Include tax exempt interest from Form MO-A, Part 1, Line 7 (if filing Form MO-1040). <b>Attach Forms W-2(s), 1099(s), 1099-R(s), 1099-DIV, 1099-INT, 1099-MISC, etc.</b> ....				3    00
4. Enter the amount of railroad retirement benefits (not included in Line 2) before any deductions. <b>Attach Form RRB/1099-R (Tier II). If filing Form MO-1040, refer to Form MO-A, Part 1, Line 9.</b> ....				4    00
5. Enter the amount of veteran's payments or benefits before any deductions. <b>Attach letter from Veterans Affairs.</b> ....				5    00
6. Enter the total amount received by you and/or your <b>minor children</b> from: public assistance, SSI, child support, or Temporary Assistance payments (TA and/or TANF). <b>Attach a copy of Form SSA-1099(s), a letter from the Social Security Administration and/or Social Services that includes the total amount of assistance received and Employment Security 1099, if applicable.</b> ....				6    00
7. Enter the amount of nonbusiness loss(es). You must include nonbusiness losses in your household income (as a positive amount) here. <b>(Include capital loss from Federal Form 1040, Line 13.)</b> ....				7    00
8. <b>TOTAL</b> household income — Add Lines 1 through 7. Enter total here. ....				8    00
9. Mark the box that applies and enter the appropriate amount. <input type="checkbox"/> a. Enter \$0 if filing status is Single or Married Living Separate; <b>If married and filing combined;</b> <input type="checkbox"/> b. Enter \$2,000 if you rented or did not own your home for the entire year; <input type="checkbox"/> c. Enter \$4,000 if you owned and occupied your home for the entire year; ....				9    -    00
10. Net household income — Subtract Line 9 from Line 8 and enter the amount; mark the box that applies. <input type="checkbox"/> a. <b>If you rented or did not own and occupy your home for the entire year</b> , Line 10 cannot exceed \$27,500. If the total is greater than \$27,500, <b>STOP - no credit is allowed. Do not file this claim.</b> <input type="checkbox"/> b. <b>If you owned and occupied your home for the entire year</b> , Line 10 cannot exceed \$30,000. If the total is greater than \$30,000, <b>STOP - no credit is allowed. Do not file this claim.</b> ....				10    00
11. If you owned your home, enter the total amount of property tax paid for your home less special assessments. <b>Attach a copy of PAID real estate tax receipt(s). If your home is on more than five acres or you own a mobile home, attach Form 948, Assessor's Certification.</b> ....				11    00
12. If you rented your home, enter the amount from Form MO-CRP(s), Line 9. <b>Attach rent receipt(s) for each rent payment or a summary for the entire year; a statement from your landlord, or copies of cancelled checks (front and back) along with Form MO-CRP.</b> ....				12    00
13. Add Lines 11 and 12. If you rented your home, enter the total or \$750, whichever is less. If you owned your home, enter the total or \$1,100, whichever is less. ....				13    00
14. Apply Lines 10 and 13 to the chart in the instructions for MO-1040, pages 39-41 or MO-1040P, pages 27-29 to figure your Property Tax Credit. You <b>must use the chart</b> to see how much credit you are allowed. Note: Renters - maximum allowed is \$750. Owners - maximum allowed is \$1,100. Enter this amount on Form MO-1040, Line 38 OR Form MO-1040P, Line 20. ....				14    00
<b>THIS FORM MUST BE ATTACHED TO FORM MO-1040 OR FORM MO-1040P.</b>				



MISSOURI DEPARTMENT OF REVENUE  
**CERTIFICATION OF RENT PAID FOR 2009**

**2009**  
FORM  
**MO-CRP**

**Failure to provide landlord  
information will result in denial  
or delay of your claim.**

1. SOCIAL SECURITY NUMBER		SPOUSE'S SOCIAL SECURITY NUMBER		ARE YOU RELATED TO YOUR LANDLORD? <input type="checkbox"/> YES <input type="checkbox"/> NO IF YES, EXPLAIN.	
2. NAME			3. LANDLORD'S NAME, LAST 4 DIGITS OF SSN, OR FEIN (MUST BE COMPLETED)		
PHYSICAL ADDRESS OF RENTAL UNIT (P.O. BOX NOT ALLOWED)		APT. NUMBER	LANDLORD'S ADDRESS, CITY, STATE, AND ZIP CODE (MUST BE COMPLETED)		APT. NUMBER
CITY, STATE, AND ZIP CODE				4. LANDLORD'S PHONE NUMBER (MUST BE COMPLETED) ( ) - - - - -	
5. RENTAL PERIOD DURING YEAR	FROM: MONTH	DAY	YEAR	TO: MONTH	DAY
			<b>2009</b>		<b>2009</b>
6. Enter your gross rent paid. <b>Attach rent receipt(s) for each rent payment for the entire year, a statement from your landlord, or copies of cancelled checks (front and back). If receiving housing assistance, enter the amount of rent YOU paid. . .</b>					6 00
7. Check the appropriate box and enter the corresponding percentage on Line 7. <input type="checkbox"/> A. APARTMENT, HOUSE, MOBILE HOME, OR DUPLEX — 100% <input type="checkbox"/> B. MOBILE HOME LOT — 100% <input type="checkbox"/> C. BOARDING HOME / RESIDENTIAL CARE — 50% <input type="checkbox"/> D. SKILLED OR INTERMEDIATE CARE NURSING HOME — 45% <input type="checkbox"/> E. HOTEL If meals are included, enter — 50%; Otherwise, enter — 100% <input type="checkbox"/> F. LOW INCOME HOUSING — 100% (Rent cannot exceed 40% of total household income.) <input type="checkbox"/> G. SHARED RESIDENCE — If you shared your rent with relatives and/or friends (other than your spouse or children under 18), check the appropriate box and enter percentage. <b>Additional persons sharing rent/percentage to be entered:</b> <input type="checkbox"/> 1 (50%) <input type="checkbox"/> 2 (33%) <input type="checkbox"/> 3 (25%) . . . . .					7 %
8. Net rent paid — Multiply Line 6 by the percentage on Line 7. . . . .					8 00
9. Multiply Line 8 by 20%. Enter amount here and on Line 10 of Form MO-PTC or Line 12 of Form MO-PTS. . . . .					9 00

MO 860-1089 (11-2009)

**For Privacy Notice, see the instructions.**



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