DO NOT file this claim if you are going to file a Missouri income tax return! See the instructions.

2016 FORM MO-PTC

MISSOURI DEPARTMENT OF REVENUE

PROPERTY TAX CREDIT CLAIM

AMENDED CLAIM ☐

VENDOR CODE **006**

SOCIAL SECURITY NO.	SPOUSE'S SOCIAL SECURITY NO.		
3 3 5 3 3 5 5 5 5			
LAST NAME	FIRST NAME	INITIAL	JR, SR
TREAT	GARY	N	SR
BIRTHDATE (MMDDYY)	TELEPHONE NUMBER	DECEASED 2016	
10 / 08 / 31	(_ _ _)_ _ _-_ _ _ _	☒	
SPOUSE'S LAST NAME	FIRST NAME	INITIAL	JR, SR
BIRTHDATE (MMDDYY)	DECEASED 2016	IN CARE OF NAME (ATTORNEY, EXECUTOR, PERSONAL REPRESENTATIVE, ETC.)	
___ ___/___ ___/___ ___	☐		
PRESENT ADDRESS (INCLUDE APARTMENT NO. OR RURAL ROUTE)	CITY, TOWN, OR POST OFFICE	STATE	ZIP CODE
215 BITTERROOT RD	OSAGE BEACH	MO	65065

QUALIFICATIONS

You must check a qualification to be eligible for a credit. Check only one. REQUIRED COPIES OF LETTERS, FORMS, ETC., MUST BE INCLUDED WITH CLAIM.

☒ A. 65 years of age or older **(Attach a copy of Form SSA-1099. You must be a full year resident.)**

☐ B. 100% Disabled Veteran as a result of military service **(Attach a copy of the letter from Department of Veterans Affairs.)**

☐ C. 100% Disabled **(Attach a copy of the letter from Social Security Administration or Form SSA-1099.)**

☐ D. 60 years of age or older and received surviving spouse benefits **(Attach a copy of Form SSA-1099.)**

FILING STATUS ☒ Single ☐ Married — Filing Combined ☐ Married — **Living Separate for Entire Year** **If married filing combined, you must report both incomes.**

FAILURE TO PROVIDE THE ATTACHMENTS LISTED BELOW (RENT RECEIPT(S), TAX RECEIPT(S), FORMS 1099, W-2, ETC.) WILL RESULT IN DENIAL OR DELAY OF YOUR CLAIM!

HOUSEHOLD INCOME

1. Enter the amount of social security benefits received by you, your spouse, and your **minor children** before any deductions and the amount of social security equivalent railroad retirement benefits. **ATTACH** Forms SSA-1099, RRB-1099, or SSI Statement.	1	21,935	00
2. Enter the total amount of wages, pensions, annuities, dividends, interest income, rental income, or other income. **ATTACH** Forms W-2, 1099, 1099-R, 1099-DIV, 1099-INT, 1099-MISC, etc.	2	3,751	00
3. Enter the amount of railroad retirement benefits (not included in Line 1) before any deductions. **ATTACH** Form RRB-1099-R (Tier II).	3		00
4. Enter the amount of veteran's payments or benefits before any deductions. **ATTACH** letter from Veterans Affairs.	4	1,250	00
5. Enter the total amount received by you, your spouse, and your **minor children** from: public assistance, SSI, child support, Temporary Assistance payments (TA and TANF). **ATTACH** copy of Forms SSA-1099, a letter from the Social Security Administration and Social Services that includes the total amount of assistance received and Employment Security 1099, if applicable.	5		00
6. **TOTAL** household income — Add Lines 1 through 5.	6	26,936	00
7. **MARK THE BOX THAT APPLIES** and enter the appropriate amount. ☒ a. Enter $0 if **Single** or **Married Living Separate**; **If Married and Filing Combined;** ☐ b. Enter $2,000 if you rented or did not own your home for the entire year; ☐ c. Enter $4,000 if you owned and occupied your home for the entire year;	7	0	00
8. Net household income — Subtract Line 7 from Line 6 and enter the amount; **MARK THE BOX THAT APPLIES**. ☐ a. **If you rented or did not own and occupy your home for the entire year**, Line 8 cannot exceed $27,500. If the total is greater than $27,500, **STOP - no credit is allowed. Do not file this claim**. ☒ b. **If you owned and occupied your home for the entire year**, Line 8 cannot exceed $30,000. If the total is greater than $30,000, **STOP - no credit is allowed. Do not file this claim**.	8	26,936	00

REAL ESTATE TAX / RENT PAID

9. If you owned your home, enter the total amount of property tax paid for your home, less special assessments, or $1,100, whichever is less. **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.	9	681	00
10. If you rented, enter the total amount from Form(s) MO-CRP, Line 9, or $750, whichever is less. **ATTACH** rent receipts or a signed statement from your landlord. **NOTE: If you rent from a facility that does not pay property tax, you are not eligible for a Property Tax Credit**.	10	0	00
11. Enter the total of Lines 9 and 10, or $1,100, whichever is less.	11	681	00

CREDITS

12. You **must use the chart on pages 13-15** to see how much refund you are allowed. Apply amounts from Lines 8 and 11 to chart on pages 13-15 to figure your Property Tax Credit.	12	0	00

DIRECT DEPOSIT

If you would like your refund deposited directly to your checking or savings account, complete boxes a, b, and c below.

a. Routing Number 8 1 2 4 5 7 8 8 8 b. Account Number 1 2 2 7 4 8 9 c. ☒ Checking ☐ Savings

SIGNATURE

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which he or she has any knowledge. As provided in Chapter 143, RSMo, a penalty of up to $500 shall be imposed on any individual who files a frivolous return. I also declare under penalties of perjury that I employ no illegal or unauthorized aliens as defined under federal law and that I am not eligible for any tax exemption, credit or abatement if I employ such aliens.

I authorize the Director of Revenue or delegate to discuss my claim and attachments with the preparer or any member of the preparer's firm. ☐ YES ☐ NO	E-MAIL ADDRESS		PREPARER'S PHONE (__ __ __)__ __ __-__ __ __ __
SIGNATURE	DATE (MMDDYYYY) __ __/__ __/__ __ __ __	PREPARER'S SIGNATURE	FEIN, SSN, OR PTIN
SPOUSE'S SIGNATURE (If filing combined, BOTH must sign)	DAYTIME TELEPHONE (__ __ __)__ __ __-__ __ __ __	PREPARER'S ADDRESS AND ZIP CODE	DATE (MMDDYYYY) __ __/__ __/__ __ __ __

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Mail claim and attachments to Missouri Department of Revenue, P.O. Box 3385, Jefferson City, MO 65105-3385.

For Privacy Notice, see instructions.