# Missouri Department of Revenue Property Tax Credit Claim

## Form MO-PTC

**2016**

### Filing Status

- [ ] Single
- [ ] Married — Filing Combined
- [ ] Married — Living Separate for Entire Year

**Qualifications**

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

**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!**

### 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!

### Qualifications

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

### 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.**
   
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.**
   
3. Enter the amount of railroad retirement benefits (not included in Line 1) before any deductions. **ATTACH Form RRB-1099-R (Tier II).**
   
4. Enter the amount of veteran’s payments or benefits before any deductions. **ATTACH letter from Veterans Affairs.**
   
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.**
   
6. TOTAL household income — Add Lines 1 through 5. Enter total here.
   
7. MARK THE BOX THAT APPLIES and enter the appropriate amount.
   - [ ] a. Enter $0 if Single or Married Living Separate;
   - [ ] 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;
   - [ ] d. Enter $6,000 if you had a homestead exemption.
   
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.

### 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.**
   
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.

11. Enter the total of Lines 9 and 10, or $1,100, whichever is less.

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.**

### Signatures

- 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.
- E-MAIL ADDRESS
- PREPARER’S PHONE
- FEIN, SSN, OR PTIN

**Signature**

- DATE (MMDDYYYY)
- PREPARER’S SIGNATURE
- ZIP CODE

**Spouse’s Signature**

- DATE (MMDDYYYY)
- FEIN, SSN, OR PTIN

**Mail claim and attachments to Missouri Department of Revenue, P.O. Box 2800, Jefferson City, MO 65105-2800.**

For Privacy Notice, see instructions.
### Missouri Department of Revenue

#### 2016 Certification of Rent Paid

One Form MO-CRP must be provided for each rental location in which you resided. Failure to provide landlord information will result in denial or delay of your claim.

<table>
<thead>
<tr>
<th>Section</th>
<th>Information</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Social Security Number (SSN)</td>
<td>Spouse’s SSN</td>
</tr>
<tr>
<td>Are you related to your landlord?</td>
<td>Yes</td>
</tr>
<tr>
<td>2. Name</td>
<td>Physical Address of Rental Unit (P.O. Box Not Allowed)</td>
</tr>
<tr>
<td>City</td>
<td>State</td>
</tr>
<tr>
<td>3. Landlord’s Name</td>
<td>Landlord’s Last 4 Digits of Social Security Number</td>
</tr>
<tr>
<td>Landlord’s Street Address (Must be completed)</td>
<td>Apartment Number</td>
</tr>
<tr>
<td>City</td>
<td>State</td>
</tr>
<tr>
<td>4. Landlord’s Phone Number (Must be completed)</td>
<td>From: (MM/DD/YY)</td>
</tr>
<tr>
<td>5. Rental Period During Year</td>
<td>From: (MM/DD/YY)</td>
</tr>
<tr>
<td>6.</td>
<td>Enter your gross rent paid. Attach rent receipt(s) for each rent payment for the entire year, a signed statement from your landlord, or copies of canceled checks (front and back). If you received housing assistance, enter the amount of rent you paid. Note: If you rent from a facility that does not pay property tax, you are not eligible for a Property Tax Credit.</td>
</tr>
<tr>
<td>7. Select the appropriate box below and enter the corresponding percentage on Line 7.</td>
<td>7. _______ %</td>
</tr>
<tr>
<td>☐ A. Apartment, House, Mobile Home, or Duplex - 100%</td>
<td>☐ B. Mobile Home Lot - 100%</td>
</tr>
<tr>
<td>☐ C. Boarding Home or Residential Care - 50%</td>
<td>☐ D. Skilled or Intermediate Care Nursing Home - 45%</td>
</tr>
<tr>
<td>☐ E. Hotel, if meals are included, enter - 50%; Otherwise, enter - 100%</td>
<td>☐ F. Low Income Housing - 100% (Rent cannot exceed 40% of total household income.)</td>
</tr>
<tr>
<td>☐ G. Shared Residence – If you shared your rent with relatives or friends (other than your spouse or children under 18), select the appropriate box based on the additional persons sharing rent:</td>
<td>☐ 1 (50%)</td>
</tr>
<tr>
<td>8. Net rent paid - Multiply Line 6 by the percentage on Line 7.</td>
<td>8. _______ 00</td>
</tr>
<tr>
<td>9. Multiply Line 8 by 20%. Enter amount here and on Line 10 of Form MO-PTC or Line 12 of Form MO-PTS.</td>
<td>9. _______ 00</td>
</tr>
</tbody>
</table>

For Privacy Notice, see instructions.

Taxation Division

Attach to Form MO-PTC or MO-PTS and mail to the Missouri Department of Revenue.
Missouri Department of Revenue
2016 Certification of Rent Paid

Form MO-CRP

One Form MO-CRP must be provided for each rental location in which you resided. Failure to provide landlord information will result in denial or delay of your claim.

1. Social Security Number (SSN) ____________________________ Spouse’s SSN ____________________________

Are you related to your landlord?  [ ] Yes  [ ] No  [ ] If yes, explain ____________________________

2. Name ____________________________

Physical Address of Rental Unit (P.O. Box Not Allowed) ____________________________ Apartment Number ______

City ____________________________ State ______ ZIP Code ______

3. Landlord’s Name ____________________________

Landlord’s Last 4 Digits of Social Security Number ____________________________ Landlord’s Federal Employee Identification Number (FEIN) ____________________________

Landlord’s Street Address (Must be completed) ____________________________ Apartment Number ______

City ____________________________ State ______ ZIP Code ______

4. Landlord’s Phone Number (Must be completed) ____________________________

From: (MM/DD/YY) ____________________________ To: (MM/DD/YY) ____________________________

5. Rental Period During Year ____________________________

6. Enter your gross rent paid. Attach rent receipt(s) for each rent payment for the entire year, a signed statement from your landlord, or copies of canceled checks (front and back). If you received housing assistance, enter the amount of rent you paid. Note: If you rent from a facility that does not pay property tax, you are not eligible for a Property Tax Credit. 6. ______ 00

7. Select the appropriate box below and enter the corresponding percentage on Line 7. 7. ______ %

[ ] A. Apartment, House, Mobile Home, or Duplex - 100%
[ ] B. Mobile Home Lot - 100%
[ ] C. Boarding Home or Residential Care - 50%
[ ] D. Skilled or Intermediate Care Nursing Home - 45%
[ ] E. Hotel, if meals are included, enter - 50%; Otherwise, enter - 100%
[ ] F. Low Income Housing - 100% (Rent cannot exceed 40% of total household income.)
[ ] G. Shared Residence – If you shared your rent with relatives or friends (other than your spouse or children under 18), select the appropriate box based on the additional persons sharing rent:

[ ] 1 (50%) [ ] 2 (33%) [ ] 3 (25%)

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

Taxation Division
Attach to Form MO-PTC or MO-PTS and mail to the Missouri Department of Revenue.