

Print in BLACK ink only and DO NOT STAPLE. For Privacy Notice, see Instructions.

	Select Here for Amended Claim		Vende	or Code	Department	Use On	ly	
			0	0 1				
Name		M.I. M.I.	Deceased in 2021 Spouse's Social Spouse's Birthda Last Name Spouse's Last Name	_	-		Deceased in 2021 Suffix Suffix	
Address	Present Address (Include Apartment Number or Rura City, Town, or Post Office County of Residence	al Rout	re)	State	ZIP Code] - [
Qualifications	Select only one qualification. Copies of letters, forms, etc., must be included with claim. A. 65 years of age or older - You must be a full year resident. (Attach Form SSA-1099.) B. 100% Disabled Veteran as a result of military service (Attach letter from Department of Veterans Affairs - see instructions.) C. 100% Disabled (Attach letter from Social Security Administration or Form SSA-1099.) D. 60 years of age or older and received surviving spouse benefits (Attach Form SSA-1099.)							
Filing	Select only one filing status. If married filin Single Married - Filing Combin		mbined, you must report bo Married - Living Separa					

Failure to provide the following attachments will result in denial or delay of your claim: Verification of Rent Paid (Form 5674), Form(s) 1099, W-2, etc.

	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 Form(s) SSA-1099 or RRB-1099 (TIER I)	1	. 00
	2.		2	. 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 (see instructions on page 5)	4	. 00
ncome	5.	Enter the total amount received by you, your spouse, and your minor children from: public assistance, SSI, child support, or Temporary Assistance payments (TA and TANF). Attach a letter from the Social Security Administration that includes the amount of assistance received if applicable	5	. 00
Household Income	6.	Total household income - Add Lines 1 through 5 and enter the total here	6	. 00
Ног	7.	Enter the appropriate amount from the options below	7	. 00
		Single or Married Living Separate - Enter \$0		
		• Married and Filing Combined - rented or did not own your home for the entire year - Enter \$	2,000	
		 Married and Filing Combined - rented or did not own your home for the entire year - Enter \$ Married and Filing Combined - owned and occupied your home for the entire year - Enter \$ 		
	8.	Married and Filing Combined - owned and occupied your home for the entire year - Enter \$. 00
	8.	Married and Filing Combined - owned and occupied your home for the entire year - Enter \$	4,000].[00]
	8.	 Married and Filing Combined - owned and occupied your home for the entire year - Enter \$ Net household income - Subtract Line 7 from Line 6 and enter the amount here	4,000	. 00
and Rent Paid	8. 9.	 Married and Filing Combined - owned and occupied your home for the entire year - Enter \$ Net household income - Subtract Line 7 from Line 6 and enter the amount here If you rented or did not own and occupy your home for the entire year and Line 8 is greater than \$27,200, you are not eligible to file this claim. If you owned and occupied your home for the entire year and Line 8 is greater 	4,000	. 00
Real Estate Tax and Rent Paid		 Married and Filing Combined - owned and occupied your home for the entire year - Enter \$ Net household income - Subtract Line 7 from Line 6 and enter the amount here If you rented or did not own and occupy your home for the entire year and Line 8 is greater than \$27,200, you are not eligible to file this claim. If you owned and occupied your home for the entire year and Line 8 is greater than \$30,000, you are not eligible to file this claim. 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 your 2021 paid real estate tax receipt(s). If your home is on more than five acres or you own a mobile home, attach the Assessor's Certification (Form 948)	8	

12.	Apply amounts from Lines 8 and 11 to chart on pages 17-19 to figure your Property Tax Credit.		
	You must use the chart on pages 17-19 to see how much refund you are allowed	12	00

Reserved

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. By signing or entering my name in the "Signature" field(s) below, I am providing the Department of Revenue with my signature as required under Section 143.561, RSMo. 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. Signature Date (MM/DD/YY) Date (MM/DD/YY) Spouse's Signature (If filing combined, BOTH must sign) E-mail Address Daytime Telephone Date (MM/DD/YY) Preparer's Signature Preparer's FEIN, SSN, or PTIN Preparer's Telephone ZIP Code Preparer's Address State I authorize the Director of Revenue or delegate to discuss my claim and attachments with the preparer or any member of his or her firm, or if internally prepared, any member of the internal staff............ Did you pay a tax return preparer to complete your return, but the preparer failed to sign the return or provide an Internal Revenue Service preparer tax identification number? If you marked yes, please insert the preparer's name, address, and phone number in the applicable sections of the signature block above..... **Department Use Only** K

Mail to: Taxation Division

Signature

P.O. Box 2800

Jefferson City, MO 65105-2800

Phone: (573) 751-3505 **Fax:** (573) 522-1762 **TTY:** (800) 735-2966 E-mail: propertytaxcredit@dor.mo.gov Form MO-PTC (Revised 12-2021)

Ever served on active duty in the United States Armed Forces? If yes, visit dor.mo.gov/military/ to see the services and benefits we offer to all eligible

military individuals. A list of all state agency resources and benefits can be found at weteranbenefits.mo.gov/state-benefits/.



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.

	On the North and
1.	Social Security Number Spouse's Social Security Number
2.	Select this box if related to your landlord. If so, explain. Name (First, Last)
	Physical Address of Rental Unit (P.O. Box Not Allowed) Apartment Number
	City State ZIP Code
3.	Landlord's Name (First, Last)
	Landlord's Street Address (Must be completed) Apartment Number
	City State ZIP Code
1	Landleyd's Dhana Number (Must be completed)
4.	Landlord's Phone Number (Must be completed) From: To:
5.	Rental Period During Year (MM/DD/YY) (MM/DD/YY)
6.	Enter your gross rent paid. Attach a completed Verification of Rent Paid (Form 5674). 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
	, ou also not on grant for all roport, rank distance in a second
7.	Select the appropriate box below and enter the corresponding percentage on Line 7
	A. Apartment, House, Mobile Home, or Duplex - 100% F. Low Income Housing - 100% (Rent cannot exceed 40% of total household income.)
	B. Mobile Home Lot - 100%
	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 person(s) sharing rent:
	D. Skilled or Intermediate Care Nursing Home - 45% 1 (50%) 2 (33%) 3 (25%)
	E. Hotel - 100%; if meals are included - 50%
8.	Net rent paid - Multiply Line 6 by the percentage on Line 7
9.	Multiply Line 8 by 20%. Enter amount here and on Line 10 of Form MO-PTC or Line 12 of Form MO-PTS

21315010001
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Form MO-CRP (Revised 12-2021)



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2. Name (First, Last)	
Physical Address of Rental Unit (P.O. Box Not Allowed)	Apartment Number
City	State ZIP Code
3. Landlord's Name (First, Last)	
Landlord's Street Address (Must be completed)	Apartment Number
City	State ZIP Code
Landlord's Phone Number (Must be completed)	
From:	To:
5. Rental Period During Year (MM/DD/YY)	(MM/DD/YY)
C. Fatan value areas were reid. Attack a consoleted Varification of Doub Poid (Forms 507	(A) If you washing haveing
 Enter your gross rent paid. Attach a completed Verification of Rent Paid (<u>Form 567</u> assistance, enter the amount of rent you paid. Note: If you rent from a facility that 	at does not pay property tax,
you are not eligible for a Property Tax Credit	
7. Select the appropriate box below and enter the corresponding percentage on Line	7
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hou	usehold income.)
B. Mobile Home Lot - 100% G. Sha	ared Residence – If you shared your rent with relatives or friends
C. Boarding Home or Residential Care - 50% (oth	ner than your spouse or children under 18), select the appropriate
D. Skilled or Intermediate Care Nursing Home - 45%	s based on the additional person(s) sharing rent:
E. Hatal, 1000/. if marala are included. 500/	1 (50%) 2 (33%) 3 (25%)
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Form MO-CRP (Revised 12-2021)



		[1	
Department Use Only					
(MM/DD/YY)					

	Landlord must co	omplete this form each year.					
			Tax Year				
	Tenant's Name	Social Security Number					
		-	-				
	Rental Address						
	Tional Address						
n	City	State	ZIP Code				
Tenant and Rental Information							
for	Rental Begin Date (MM/DD/YYYY) Rental Er	nd Date (MM/DD/YYYY)					
al lu							
ent				. —			
ы В	Gross Rent Paid for the Year			00			
t ar							
nan	Amount of utilities included in monthly payment (if any)						
Te	Did the tenant receive any housing assistance?		Yes	No			
	If yes, how much rent was the tenant responsible for?	L		. 00			
	Did anyone reside at this dwelling with the above tenant?		Yes	No			
	,			7			
	If yes, how many were over the age of 18?						
	Landlord's Name						
	Europia o Mario						
n	Landlord's Address						
natio							
Landlord Information	City	State	ZIP Code				
<u>=</u>							
lor	Tolophone Number (Home)	Tolonbana Number (Call)					
and	Telephone Number (Home)	Telephone Number (Cell)					
_							
	Telephone Number (Work)	Landlord's Signature					

Any person intentionally filing a fraudulent Property Tax Credit Claim may be prosecuted.

<u>Section 143.941, RSMo.</u> states in part: (...upon conviction thereof, be fined not more than ten thousand dollars, or be imprisoned in the county jail for not more than one year or by not less than two nor more than five years in the state penitentiary or by both fine and imprisonment together with the cost of prosecution.)

Mail to: Taxation Division

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P.O. Box 2200

Jefferson City, MO 65105-2200

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If yes, visit <u>dor.mo.gov/military/</u> to see the services and benefits we offer to all eligible military individuals. A list of all state agency resources and benefits can be found at <u>veteranbenefits.mo.gov/state-benefits/</u>.

Form 5674 (Revised 12-2021)



Department Use Only			
(MM/DD/YY)			

	Landlord must co	mplete this form each year.	
	Tenant's Name	Tax Year L Social Security Number	
	Rental Address		
	Tional Address		
on	City	State	ZIP Code
mati			
nfor	Rental Begin Date (MM/DD/YYYY) Rental En	d Date (MM/DD/YYYY)	
ental I			
and Re	Gross Rent Paid for the Year		. 00
Tenant and Rental Information	Amount of utilities included in monthly payment (if any)		
Te	Did the tenant receive any housing assistance?		Yes No
	If yes, how much rent was the tenant responsible for?		. 00
	Did anyone reside at this dwelling with the above tenant?		Yes No
	If yes, how many were over the age of 18?		
	Landlord's Name		
	Laurellaurella Adelus as		
ation	Landlord's Address		
Landlord Information	City	State	ZIP Code
rd Ir			
ndlc	Telephone Number (Home)	Telephone Number (Cell)	
La			
	Telephone Number (Work)	Landlord's Signature	

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