

2020 Form PR-141

Vermont Renter Rebate Claim

For the year Jan 1 - Dec 31, 2020



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Claimant's Last Name		First Name		MI	Claimant's Social Security Number	
Spouse's/CU Partner's Last Name		First Name		MI	Spouse's or CU Partner's Social Security Number	
Mailing Address (Number and Street/Road or PO Box)					Claimant's Date of Birth (MM/DD/YYYY) / /	
City		State	ZIP Code			
Vermont School District Code	911/Physical Street Address on 12/31/2020				City/Town of Legal Residence on 12/31/2020 & State	
Federal Filing Status	<input type="checkbox"/> Single	<input type="checkbox"/> Married/CU Filing Jointly	<input type="checkbox"/> Married/CU Filing Separately	<input type="checkbox"/> Head of Household	Will you be using Renter Rebate to pay Income Tax liability? <input type="checkbox"/> Yes <input type="checkbox"/> No	

To determine eligibility for the Renter Rebate, answer questions 1-3.

- Were you domiciled in Vermont all of calendar year 2020? Yes. Go to Question 2. No. STOP. You are not eligible.
- Were you claimed as a dependent by another taxpayer in 2020? Yes. STOP. You are not eligible. No. Go to Question 3.
- Did you rent in Vermont for 6 months or more in 2020? Yes. Go to Question 4. No. STOP. You are not eligible.

If you are eligible for a Renter Rebate, answer questions 4-8.

- Did you share your rental with another adult who was *not* your jointly filed spouse? Yes No
- Was your rent subsidized? Yes No
- Home Use: If more than 25% of this rental was used for business, see instructions. If no business use, enter 100%. _____ %
- Number of months rented in 2020 _____
- Number of Personal Exemptions claimed (from Form IN-111, Line 5d) _____
(See the instructions if you did not file Form IN-111)

If you filed a federal income tax return, answer questions 9-13. If you did *not* file a federal return because your income was under the filing threshold, skip questions 9-13, sign in the signature section below, and submit the form.

- Total Income (from federal Form 1040, Line 7b) _____
- 75% of nontaxable Social Security benefits (from federal Form 1040, Line 5a minus Line 5b multiplied by 0.75) .. _____
- Tax-exempt interest (from federal Form 1040, Line 2a minus 2b) .. _____
- Loss add-backs (see instructions) .. _____
- Total (add lines 9-12) .. _____

Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Preparers cannot use return information for purposes other than preparing returns.

Signature	Date (MMDDYYYY)	Daytime Telephone Number
Signature (If a joint return, BOTH must sign.)	Date (MMDDYYYY)	Daytime Telephone Number
Paid Preparer's Signature	Date (MMDDYYYY)	Preparer's Telephone Number
Firm's Name (or yours if self-employed) and address	Preparer's SSN or PTIN	EIN

Check if the Department of Taxes may discuss this return with the preparer shown.