



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

Three input boxes for Social Security Number separated by dashes.

Spouse's Social Security Number

Three input boxes for Spouse's Social Security Number separated by dashes.

Select this box if related to your landlord. If so, explain.

Large empty text box for explanation.

2. Name (First, Last)

Large empty text box for Name (First, Last).

Physical Address of Rental Unit (P.O. Box Not Allowed)

Apartment Number

Large empty text box for Physical Address of Rental Unit.

Input box for Apartment Number.

City

State

ZIP Code

Input box for City.

Input box for State.

Input box for ZIP Code.

3. Landlord's Name (First, Last)

Large empty text box for Landlord's Name (First, Last).

Landlord's Street Address (Must be completed)

Apartment Number

Large empty text box for Landlord's Street Address.

Input box for Apartment Number.

City

State

ZIP Code

Input box for City.

Input box for State.

Input box for ZIP Code.

4. Landlord's Phone Number (Must be completed)

Large empty text box for Landlord's Phone Number.

5. Rental Period During Year (MM/DD/YY)

From:

Input box for month/day.

Input box for year.

2023

To:

Input box for month/day.

Input box for year.

2023

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.

Input box for gross rent paid with a .00 suffix.

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

Input box for percentage with a % suffix.

- 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 - 100%; if meals are included - 50%

- 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 person(s) sharing rent:
  - 1 (50%)
  - 2 (33%)
  - 3 (25%)

8. Net rent paid - Multiply Line 6 by the percentage on Line 7.

Input box for net rent paid with a .00 suffix.

9. Multiply Line 8 by 20%. Enter amount here and on Line 10 of Form MO-PTC or Line 12 of Form MO-PTS.

Input box for 20% of net rent paid with a .00 suffix.



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For Privacy Notice, see instructions.

Form MO-CRP (Revised 12-2023)

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

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 veteranbenefits.mo.gov/state-benefits/.