Please PRINT in BLUE or BLACK INK

2017 VERMONT

Include Schedule HI-144 and Form LC-142

Renter Rebate Claim

FORM PR-141

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VERMONT For Household Income of \$47,000 or less PR-

Must Be Filed With: Househ	old Income (Schedule H	-144) and Landlor	d's Certificate (F	Form LC-142)	For the year Jan. 1-Dec. 31, 201	17
Claimant's Last Name	First Nam	ne	Initia	al Claimant's S	Social Security Number	
Spouse's or CU Partner's Last N	Name First Nam	ne	Initia	al Spouse's or 0	CU Partner's Social Security Nun	aber
Mailing Address (Number and S	Street/Road or PO Box)			Claimant's D	Date of Birth (MM DD YYYY)	
City		State ZIP Coo	de		Filing Status (Single=S; Head hold=H; Joint=J; Separate=P)	
Physical Location of rental prop	perty (Use a number, street/r	oad name. Do not use	e a PO Box or "sam	ne.") E-file Certifi	icate Number (from LC-142), if a	vailable
Vermont School District Coc	de 2. City/Town of Legal	Residence on Dec. 31,	, 2017 State	Will you be a Tax liability?	using Renter Rebate to pay Incom? Yes No	ie
Q1. Were you domiciled in Vern Q2. Were you claimed as a deper Q3. Did you rent in Vermont all	mont all of calendar year 2017s endent by another taxpayer in 2 12 months in calendar year 20	?	Yes, Go to Q2. Yes, STOP. You a Yes, Complete this	are not eligible. s form	No, STOP. You are not eligen No, Go to Q3. No, STOP. You are not eligen No, STOP.	_
REBATE CALCU		doing rebate calcula UST include Scheo			e (Schedule HI-144). th this form.	
 Allocable Rent (from Form LC Home Use. If more than 25% of If no business use, enter 100.00% Allowable Rent for Rebate Classical Action of the Income (Schedule Home). Household Income (Schedule Home). Maximum Percentage of Income If Line 6 Household Income Enter this % on Line 7: Maximum Rent for Household. RENTER REBATE AMOUNT (for a rebate. If using your rebate). 	content of this rental is used for busines laim (Multiply Line 3 by Line of this income (Multiply Line 3 by Line of than 5. 144, Household Income, is income for Rent	4)		renter rebate. , you do not qualify on Form IN-111, Lin	5	.00.
Under penalties of periury I		AIMUM REBATE A			nts, and to the best of my know	rledge
and belief, they are true, corr Signature	rect and complete. Prepare					leage
Signature. If a joint return, E	3OTH must sign.					
		t Department of T	axes to discuss	s this return and a	attachments with your prep	arer.
Preparer's sign Preparer's Sig	ignature (or yours if self-employed) and ac	ddress	Date		Preparer's SSN or PTIN	
 5454					Preparer's Telephone Number	

Keep a copy for your records.

2017 VERMONT

Household Income

SCHEDULE HI-144



For the year Jan. 1-Dec. 31, 2017

Please PRINT in BLUE or BLACK INK

CHECK IF AMENDING

FORM HS-122 OR FORM PR-141

4 4 1 1 0 (

This schedule must be included with the 2017 Renter Rebate Claim (Form PR-141) OR the 2018 Property Tax Adjustment Claim (Form HS-122) UNLESS you are filing an AMENDED HI-144. Please read instructions before completing schedule.

Claimant's Last Name	First Name	Initial	Claimant's Social Security Number
Spouse's or CU Partner's Last Name	First Name	Initial	Claimant's Date of Birth

List the names and Social Security Numbers of all other persons (other than a Spouse or CU Partner) who had income and lived with you during 2017. Include their taxable and non-taxable income in Column 3. If you have more than two "Other Persons" living in your household, record the names and Social Security Numbers on a separate sheet of paper and include with the filing.

Other Person #1 Last Name	First Name	Initial	Other Person #1 Social Security Number
Other Person #2 Last Name	First Name	Initial	Other Person #2 Social Security Number

		Totals of ALL members of the household	1. Claimant and jointly filed spouse	2. Filing separately Spouse or CU Partner	3. Other Persons
	a.	Cash public assistance and relief	a00		.00
	b.	Social Security, SSI, disability, railroad retirement, veteran's benefits, taxable and nontaxable	ь	.00	
	c.	Unemployment compensation/worker's compensation	c00	.00	
	d.	Wages, salaries, tips, etc. (See instructions for dependent's exempt income.)	d00		
	e.	Interest and dividends	e00		
	f.	Interest on U.S., state, and municipal obligations, taxable and nontaxable	f00		
ME	g.	Alimony, support money, child support, cash gifts	g00_		
INCOME	h.	Business income. If the amount is a loss, enter -0 See instructions for offsetting a loss.	h00	.00	.00
	i.	Capital gains, taxable and nontaxable. If the amount is a loss, enter -0 See instructions for offsetting a loss	i00	.00	.00
	j.	Taxable pensions, annuities, IRA and other retirement fund distributions. See instructions.		.00	.00
	k.	Rental and royalty income. If the amount is a loss, enter -0 See instructions for offsetting a loss.	0.0		
	l.	Farm/partnerships/S corporations/LLC/ Estate or Trust income. If the amount is a loss, enter -0 See Line i instructions for only exception to offset a loss	0.0	.00	.00
	m.	Other income (See instructions for examples of other income). Please specify		.00	.00
	n.	Total Income: Add Lines a through m		.00	.00

Claimant's Last Name Social Security Number



	0.	See instructions Enter Social Security and Me tax withheld on wages claimed on Line d. Self Enter self-employment tax from Federal Sched This entry may differ from W-2/1099 or Federal Sched This entry may differ from W-2/1099 or Federal Sched This entry may differ from W-2/1099 or Federal Sched This entry may differ from W-2/1099 or Federal Sched	filed s staticare 1. Amount from F-Employed: lule SE.	spouse 1 Line n, Column 1	Spouse or	CU Partner Line n, Column 2	3. Other Persons \$ 3. Amount from Line n, Column 3
		Schedule SE amount if these taxes are paid on income not required to be reported on Schedule HI-144. Include W-2 and/or Federal Schedule if not included with income tax filing	e SE	.00		.00	
	p.	Child support paid. You must include proof of payment. See instructions	. p	.00		.00	.00
		Support paid to: Last Name	First Name		Initial	Social Security N	Number
	q.	Allowable adjustments from Federal Form 104	0 or 1040A				
		q1. Business Expenses for Reservists (1040, Line 24)	q1	.00		.00	.00
믲		q2. Alimony paid (1040, Line 31a)	q2	.00		.00	.00
INCO INCO		q3. Tuition and fees (1040, Line 34 or 1040A, Line 19)	q3.	.00		.00	.00
ADJUSTMENTS TO INCOME		q4. Self-employed health insurance deduction (1040, Line 29)	-			.00	.00
TMEN		q5. Health Savings Account deduction (1040, Line 25)	q5	.00		.00	.00
ADJUS	r.	Add Lines o, p and total of Lines q1 to q5 for each column	r	.00		.00	.00
	s.	Subtract Line r from Line n of each column. If a negative amount, enter -0	S	.00		.00	.00
	t.	Add all three amounts from Line s. If a negative	ve amount, enter -0-	·		t.	.00
	u.	Complete if born Jan. 1, 1953, and after. Enter interest and dividend income from Lines e and f	. u.	.00		.00	.00
	v.	Add all three amounts from Line u				v.	.00
	w.						10000.00
	x.	Subtract Line w from Line v. If Line w is mor	e than Line v, enter	-0		x.	.00
	y.	HOUSEHOLD INCOME. Add Line t and Line	X			y.	.00

RENTERS:

If Line y Household Income is \$47,000 or less, you may be eligible for a renter rebate. Complete Form PR-141. This schedule must be filed with the Renter Rebate Claim. Claims are due April 17, 2018, but can be filed up to Oct. 15, 2018.

If Household Income is more than \$47,000, you do not qualify for a renter rebate.

HOMEOWNERS:

Form HS-122, Property Tax Adjustment Claim, must be filed each year.

Homeowners with Household Income up to \$147,500 on Line y should complete Form HS-122, Section B. You may be eligible for a property tax adjustment. This schedule must be filed with the HS-122.

Form HS-122 Due Date - April 17, 2018. Homeowners filing a property tax adjustment, Forms HS-122 and HI-144, between April 18 and Oct. 15, 2018, may still qualify for a property tax adjustment. A \$15 late filing fee will be deducted from the adjustment.