



2105010058

**2021**

OFFICIAL USE ONLY

**I** Check your label for accuracy. If incorrect, do not use the label. Complete Section I.

Your Social Security Number  Spouse's Social Security Number

**PLEASE WRITE IN YOUR SOCIAL SECURITY NUMBER(S) ABOVE**

Last Name  First Name  MI

First Line of Address

Second Line of Address

City or Post Office  State  ZIP Code  \*CODES REQUIRED

Spouse's First Name  MI  County Code  School District Code  Country Code

Claimant's Birthdate  Spouse's Birthdate  Daytime Telephone Number

If Spouse is Deceased, fill in the oval.

**II** Fill in only one oval in each section.

1. I am filing for a rebate as a:

P. Property Owner - See Instructions

R. Renter - See instructions

B. Owner/Renter - See Instructions

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2. I certify that as of Dec. 31, 2021, I am (a):

A. Claimant age 65 or older

B. Claimant under age 65, with a spouse age 65 or older who resided in the same household

C. Widow or widower, age 50 to 64

D. Permanently disabled and age 18 to 64

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3.

Filing on behalf of a decedent

		Dollars	Cents
<b>III</b>	<b>TOTAL INCOME</b> received by you and your spouse during 2021		
4.	Social Security, SSI and SSP Income (Total benefits \$ _____ divided by 2) .....		
5.	Railroad Retirement Tier 1 Benefits (Total benefits \$ _____ divided by 2) .....		
6.	Total Benefits from Pension, Annuity, IRA Distributions and Railroad Retirement Tier 2 (Do not include federal veterans' disability payments or state veterans' payments.) .....		
7.	Interest and Dividend Income .....		
8.	Gain or Loss on the Sale or Exchange of Property..... If a loss, fill in this oval. .... <input type="checkbox"/>		
9.	Net Rental Income or Loss .....		
10.	Net Business Income or Loss .....		
Other Income.			
11a.	Salaries, wages, bonuses, commissions, and estate and trust income. ....		
11b.	Gambling and Lottery winnings, including PA Lottery winnings, prize winnings and the value of other prizes .....		
11c.	Value of inheritances, alimony and spousal support. ....		
11d.	Cash public assistance/relief. Unemployment compensation and workers' compensation, except Section 306(c) benefits. ....		
11e.	Gross amount of loss of time insurance benefits and disability insurance benefits, and life insurance benefits, except the first \$5,000 of total death benefit payments. ....		
11f.	Gifts of cash or property totaling more than \$300, except gifts between members of a household. ....		
11g.	Miscellaneous income and annualized income amount. ....		
12.	Claimants with Federal Civil Service Retirement System Benefits enter \$9,514 or \$19,028. See the instructions. ....		
13.	<b>TOTAL INCOME.</b> Add only the positive income amounts from Lines 4 through 11g and subtract the amount on Line 12. See Page 3 for income limitations. Enter this amount on Line 23. ....		

**IMPORTANT:** You must submit proof of the income you reported - See the instructions on Pages 7 to 9.



PA-1000 2021 05-21 (F1)

Your Social Security Number

[Empty box for Social Security Number]

Your Name: \_\_\_\_\_

PROPERTY OWNERS ONLY

14. Total 2021 property tax. Submit copies of receipted tax bills. 14. [ ]

15. Property Tax Rebate. Enter the maximum standard rebate amount from Table A for your income level here: ( ) Compare this amount to line 14 and enter the lesser amount to the right. 15. [ ]

RENTERS ONLY

16. Total 2021 rent paid. Submit PA Rent Certificate and/or rent receipts 16. [ ]

17. Multiply Line 16 by 20 percent (0.20) 17. [ ]

18. Rent Rebate. Enter the maximum rebate amount from Table B for your income level here: ( ) Compare this amount to line 17 and enter the lesser amount to the right. 18. [ ]

OWNER - RENTER ONLY

19. Property Tax/Rent Rebate. Enter the maximum rebate amount from Table A for your income level here: ( ) Compare this amount to the sum of Lines 15 and 18 and enter the lesser amount to the right. 19. [ ]

DIRECT DEPOSIT. Banking rules do not permit direct deposits to bank accounts outside the U.S. If your bank account is outside the U.S., do not complete the direct deposit Lines 20, 21 and 22. The department will mail you a paper check. If your rebate will be going to a bank account within the U.S., you have the option to have your rebate directly deposited. If you want the department to directly deposit your rebate into your checking or savings account, complete Lines 20, 21 and 22.

20. Place an X in one box to authorize the Department of Revenue to directly deposit your rebate into your: 20. Checking [ ] Savings [ ]

21. Routing number. Enter in boxes to the right. 21. [ ]

22. Account number. Enter in boxes to the right. 22. [ ]

23. [ ] Enter the amount from Line 13 of the claim form on this line and circle the corresponding Maximum Rebate amount for your income level. Owners use Table A and Renters use Table B.

Table with 2 main columns: TABLE A - OWNERS ONLY and TABLE B - RENTERS ONLY. Each table has 2 sub-columns: INCOME LEVEL and Maximum Standard Rebate. Rows include income brackets from \$0 to \$8,000 up to \$18,001 to \$35,000 with corresponding rebate amounts.

IV An excessive claim with intent to defraud is a misdemeanor punishable by a maximum fine of \$1,000, and/or imprisonment for up to one year upon conviction. The claimant is also subject to a penalty of 25 percent of the entire amount claimed.

CLAIMANT OATH: I declare that this claim is true, correct and complete to the best of my knowledge and belief, and this is the only claim filed by members of my household. I authorize the PA Department of Revenue access to my federal and state Personal Income Tax records, my PACE records, my Social Security Administration records and/or my Department of Human Services records. This access is for verifying the truth, correctness and completeness of the information reported in this claim.

Signature and information fields including: Claimant's Signature, Date, Witnesses' Signatures, Spouse's Signature, Date, Preparer's Signature, Date, Preparer's Name, Preparer's telephone number, City or Post Office, State, ZIP Code.

Claim filing deadline - June 30, 2022
You can call 1-888-728-2937 after June 1 to verify the status of your claim.



# PA-1000 COMPLETION SAMPLE

Fill in your Social Security Number.

Fill in this oval if your spouse is deceased.

If your label is correct, place it here.  
  
Discard label if it is not correct and fill in all data in Section I.

**PA-1000**  
Property Tax or Rent  
Rebate Form 05-21  
PA Department of Revenue  
P.O. Box 28560  
Harrisburg PA 17128-4925

**2021**

2105010017

Check your eligibility for Section I. Do not use this form to complete Section I. If Spouse Deceased, fill in the oval.

CPA USE ONLY

1. I am filing for a rebate as a:  
 P. Property Owner - See Instructions  
 R. Renter - See Instructions  
 O. Owner/Renter - See Instructions

2. I certify that as of Dec. 31, 2021, I am (a):  
 A. Claimant age 65 or older  
 B. Claimant under age 65 with a spouse age 65 or older who resided in the same household  
 C. Widow or widower, age 65 to 69  
 D. Permanently disabled and age 18 to 64

Filing on behalf of a decedent

**Section I**

4. Social Security, SSI and SSP income (Total benefits \$ ..... divided by 2) ..... 4.

5. Railroad Retirement Tier 1 Benefits (Total benefits \$ ..... divided by 2) ..... 5.

6. Total Benefits from Pensions, Annuity, IRA Distributions and Railroad Retirement Tier 2 (Do not include indirect veterans' disability payments or state veterans' payments) ..... 6.

7. Interest and Dividend Income ..... 7.

8. Gain or Loss on the Sale or Exchange of Property ..... If a loss, fill in this oval. ..... 8.

9. Net Rental Income or Loss ..... If a loss, fill in this oval. ..... 9.

10. Net Business Income or Loss ..... If a loss, fill in this oval. ..... 10.

Other Income:

11a. Salaries, wages, bonuses, commissions, and estimated business income ..... 11a.

11b. Gambling and Lottery winnings, including PA Lottery, prize winnings and the value of other prizes ..... 11b.

11c. Value of inheritances, alimony and annuities ..... 11c.

11d. Cash public assistance/retail, unemployment compensation and workers' compensation, except Section 506(d) benefits ..... 11d.

11e. Gross amount of loss of health insurance benefits and disability insurance benefits, and life insurance benefits, net of the first \$5,000 of total death benefit payments ..... 11e.

11f. Gifts of cash or property with a value more than \$300, except gifts between members of a household ..... 11f.

11g. Miscellaneous income and annualized income amount ..... 11g.

12. Claimants with Federal Civil Service Retirement System Benefits enter \$9,514 or \$19,028. See the instructions ..... 12.

13. **TOTAL INCOME.** Add only the positive income amounts from Lines 4 through 11g and subtract the amount on Line 12. See Page 3 for income limitations. Enter this amount on Line 23. .... 13.

**IMPORTANT:** You must submit proof of the income you reported - See the instructions on Pages 7 to 9.

Fill in only one oval for Line 1.  
Fill in only one oval for Line 2.

Fill in this oval on behalf of decedent.

Fill in School District Code (see Pages 16 and 17). Fill in County Code (see Page 15). Fill in Country Code if applicable (see Page 6).

Report your total Social Security, SSI, and SSP benefits here. Divide the total by 2 and enter the result on Line 4.

Report your total Railroad Retirement Tier 1 benefits here. Divide the total by 2 and enter the result on Line 5.

Enter the total of Lines 4 through 11g, less Line 12.

Property Owners complete Lines 14 and 15.

Renters complete Lines 16, 17 and 18.

If you want your rebate directly deposited, complete Lines 20, 21 and 22.

Claimant signs here.

**PA-1000 2021** 05-21  
Your Social Security Number: ..... Your Name: .....

**PROPERTY OWNERS ONLY**

14. Total 2021 property tax. Submit copies of receipted tax bills. .... 14.

15. Property Tax Rebate. Enter the maximum standard rebate amount from Table A for your income level here: (.....) Compare this amount to line 14 and enter the lesser amount to the right. .... 15.

**RENTERS ONLY**

16. Total 2021 rent paid. Submit PA Rent Certificate and/or rent receipts ..... 16.

17. Multiply Line 16 by 20 percent (0.20) ..... 17.

18. Rent Rebate. Enter the maximum rebate amount from Table B for your income level here: (.....) Compare this amount to line 17 and enter the lesser amount to the right. .... 18.

**OWNER - RENTER ONLY**

19. Property Tax/Rent Rebate. Enter the maximum rebate amount from Table A for your income level here: (.....) Compare this amount to the sum of Lines 15 and 18 and enter the lesser amount to the right. .... 19.

**DIRECT DEPOSIT.** Banking rules do not permit direct deposit to a bank account outside the U.S. If your bank account is outside the U.S., do not complete the direct deposit Lines 20, 21 and 22. The Department will mail you a paper check, if your rebate will be going to a bank account within the U.S., you have the option to have your rebate directly deposited. If you want the department to directly deposit your rebate into your checking or savings account, complete Lines 20, 21 and 22.

20. Place an X in one box to authorize the Department of Revenue to directly deposit your rebate into your: ..... 20.

21. Routing number. Enter in boxes to the right. .... 21.

22. Account number. Enter in boxes to the right. .... 22.

TABLE A - OWNERS ONLY		TABLE B - RENTERS ONLY	
INCOME LEVEL	Maximum Standard Rebate	INCOME LEVEL	Maximum Rebate
\$ 0 to \$ 8,000	\$650	\$ 0 to \$ 8,000	\$650
\$ 8,001 to \$15,000	\$900	\$ 8,001 to \$15,000	\$900
\$15,001 to \$19,000	\$300	\$19,001 to \$19,000	\$300
\$19,001 to \$19,000	\$250		

**CLAIMANT OATH:** I declare that this claim is true, correct and complete to the best of my knowledge and belief, and this is the only claim filed by members of my household. I authorize PA PA Department of Revenue access to my federal and state Personal Income Tax records, my PACE records, my Social Security Administration records and/or my Department of Human Services records. This access is for verifying the truth, correctness and completeness of the information reported in this claim.

Claimant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_ Witnesses' Signatures: If the claimant cannot sign, but only makes a mark. \_\_\_\_\_

Spouse's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

PREPARER: I declare that I prepared this return, and that it is to the best of my knowledge and belief, true, correct and complete. Name of claimant's power of attorney or nearest relative. Please print. \_\_\_\_\_

Preparer's Signature, if other than the claimant: \_\_\_\_\_ Date: \_\_\_\_\_ Telephone number of claimant's power of attorney or nearest relative. ( ) \_\_\_\_\_

Preparer's Name, Please print: \_\_\_\_\_ Home address of claimant's power of attorney or nearest relative. Please print. \_\_\_\_\_

Preparer's telephone number: ( ) \_\_\_\_\_ City or Post Office: \_\_\_\_\_ State: \_\_\_\_\_ ZIP Code: \_\_\_\_\_

Claim filing deadline - June 30, 2022  
You can call 1-888-728-2937 after June 1 to verify the status of your claim.

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If you were both a Property Owner and a Renter, complete Lines 14 through 19.

Enter your Routing Number here (direct deposit only).

Enter your Account Number here (direct deposit only).