WYOMING PROPERTY TAX REFUND PROGRAM
AFFIDAVIT AND APPLICATION FOR PROPERTY TAXES BILLED IN 2009
Filing Deadline: MONDAY, JUNE 7, 2010

Please print or type all information provided on this application.

Applicant's First Name _____ M. I. _____ Last Name _____

Social Security Number _____ Telephone Number _____

Property Address _____

Mailing Address, if different from above _____

City/Town _____, Wyoming Zip Code _____

County _____ Parcel Number _____

WYOMING RESIDENCY REQUIREMENT

The law requires the applicant taxpayer to have been a Wyoming resident for a period of at least five (5) years immediately preceding the year in which he/she applies for property tax refund under this program. A resident is a person who physically lives in Wyoming for more than one-half (1/2) of the year; however, a person does not lose his residency if his absence is for business of the state or federal government, including military service. Have you been a resident of the State of Wyoming for the past five (5) years, according to the definition in the preceding sentence?

Circle One ◉ **Yes** ○ **No**

Note: If you circled "No," do not complete the remainder of the form; you do not qualify.

PROPERTY TAX PAID ON APPLICANT'S PRIMARY RESIDENCE

What was the amount of the property tax bill issued in September 2009? $_____

If any portion of this residence was used for business purposes during the year, enter the amount of the property tax that was claimed as a business expense here. $_____

REQUIRED ATTACHMENTS:

1.) A copy of your property tax bill issued in September 2009.
2.) A copy of your property tax payment receipts issued by the county treasurer between September 2009 and June, 2010.

ANNUAL INCOME REPORT: LIST ALL TAXABLE AND NONTAXABLE INCOME

Complete the income information for all adult members of the household in the space provided below. Be sure to complete a column for each adult member of the household, even if they are not required to file an income tax return with the Internal Revenue Service. If any adult member of the household who had income did not file a federal income tax return, initial the space provided to declare that person's exemption from filing such a return.

REQUIRED ATTACHMENTS:

A copy of the front page of the IRS Form 1040, 1040A, or Form 1040EZ for every adult member of the household who filed such a return. If any adult member of the household is not required to file a federal income tax return, attach copies of a11 statements they received regarding Social Security and all other income.

Adult Household Members	Tax Payer	Additional Person	Additional Person	Additional Person	Additional Person
Last Name					
First Name					
Household Member Initial Here IF no Income Tax Return Filed					
Income					
Taxable Income (1)					
Form 1040, line 22					
Form 1040A, line 15					
Form 1040EZ, line 4					
Non-Taxable Income (1) Non-Taxable Interest					
Non-Taxable portion of IRA and other pension distributions					
Non-Taxable portion of Social Security benefits (2)					
Other					
Total for Each Household Member					

GRAND TOTAL FOR ALL MEMBERS OF THE HOUSEHOLD $

(1) See Instructions Page ANNUAL INCOME REPORTS Section #6

(2) Before Medicare / Medicaid Insurance Fees

Attach Additional Sheets IF Necessary

VALUE OF HOUSEHOLD ASSETS

The law says a taxpayer does NOT qualify for this property tax refund program if the value of certain kinds of assets exceeds $100,000.00 per adult member of the household. Here are the assets that count toward this limitation:

1.) Bank accounts;
2.) Investments (stocks, bonds, mutual funds, certificates of deposit, etc.);
3.) Real estate other than the house subject to this application; and,
4.) Motor vehicles in excess of one allowed for each adult member of the household.

Is the value of the assets listed above owned by each adult member of the household LESS THAN $100,000?

Circle One ◯ **Yes** ◉ **No**

Note: If you circled "No," do not complete the remainder of the form; you do not qualify.

CERTIFICATION

I certify under penalty of perjury that:

1.) The social security number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and

*2.) I am not subject to backup withholding because (a) I am exempt from backup withholding, or (b) I have not been notified by the IRS that I am subject to backup withholding as a result of failure to report all interest and dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and

3.) I am a U.S. person (including a U.S. resident alien), and

4.) The information entered on this application is true, correct and complete to the best of my knowledge and belief.

Signature _____ Date Signed _____

* You must cross out item number "2" above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return.

WHERE TO FILE

YOUR LOCAL COUNTY TREASURER
OR
Property Tax Refund Program
Wyoming Department of Revenue
122 W. 25th Street, 2nd Floor West
Cheyenne, WY 82002-0110

DOCUMENT RETENTION NOTICE

Neither this application nor any of the documents attached to it will be returned to the applicant. Therefore, the applicant should make and retain copies of all documents for his/her records.

PRIVACY ACT NOTIFICATION

Requesting Agency: Wyoming Department of Revenue

Why This Notification Is Provided: This notification is required by the Privacy Act of 1974 (P.L. 93-597).

Authority for Collection of Information: The State of Wyoming is required to file an information return with the Internal Revenue Service, so a correct Social Security Number (SSN) is required on this application, per Internal Revenue Code Section 6109. IRS regulations provide the following: If you fail to furnish your correct SSN to a requestor, you may be subject to a penalty of $50 for each such failure unless your failure is due to reasonable cause and not to willful neglect. If you make a false statement with no reasonable basis that results in no backup withholding, you may be subject to a $500 penalty. If you willfully falsify certifications or affirmations, you may be subject to criminal penalties including fines and/or imprisonment.

Purpose: The principal purpose for collecting information on this form, including the SSN, is to obtain the information necessary to determine whether a person is eligible for property tax relief under W.S. 39-13-109(c), and if so, to provide the State Auditor's Office the information they require to approve the relief payment.

Uses: Disclosure of identifiable information, including your SSN, shall be made to the State Auditor's Office to comply with Internal Revenue Service regulations, as stated above. This information may also be disclosed to other agencies in the event of litigation involving relief granted or denied under this program.

WYOMING PROPERTY TAX REFUND PROGRAM FILING INSTRUCTIONS

The application for the property tax refund must be properly completed and filed with the Department of Revenue or the County Treasurer of your county no **later than the first Monday in June; for 2010 that date is June 7th.**

Be sure to fill in all applicable spaces on the entire form. If a particular item is not applicable, be sure to mark it as such; do not leave items blank. Please attach all supporting documents for income. INCOMPLETE FORMS WILL RESULT IN THE DENIAL OF REFUND UNDER THIS PROGRAM.

WYOMING RESIDENCY REQUIREMENT

1.) If you qualify under the terms of the residency requirement set forth in Wyoming Residency Requirements, circle "Yes;" otherwise, circle "No."

PROPERTY TAX PAID ON APPLICANT'S PRIMARY RESIDENCE

2.) The house subject to the application must be the applicant's principal residence.

3.) In the space provided enter the total amount of the property tax bill for the subject property, as reflected on the bill you or your mortgage company received last September. Attach a copy of the bill to this application form.

4.) If any part of the residence is used for business purposes and you prepare a Schedule C - Business Income statement or a Schedule F - Farm Income statement for your income tax return, enter the amount of property tax you deducted on these schedules in the space provided.

ANNUAL INCOME REPORT

5.) Complete the income section, listing total income for all adult members of the household in the spaces provided on the application form. Be sure to enter the grand total for all members' incomes combined in the space provided. If there are more than five adult members of the household, attach additional sheets.

6.) Specific Instructions for Items Marked (1) on the Income Section of the Application:

a.) Taxable Income: For each adult household member, report the amount from the indicated line of their federal income tax return. Use the appropriate line for each member.

b.) Nontaxable interest: Enter the amount, if any, from line 8b of the Form 1040 or 1040A of each applicable household member.

c.) Nontaxable portion of IRA or other pension distributions: Subtract the amounts on lines 15b and 16b from the corresponding amounts on lines 15a and 16a of the Form 1040 and enter the results on the line provided. If you filed a Form 1040A, subtract the amounts on lines 11b and 12b from the corresponding amounts on lines 11a and 12a, and enter that result.

d.) Nontaxable portion of Social Security benefits: Subtract the amount on line 20b from the corresponding amount on line 20a of the Form 1040 and enter the result on the line provided. If you filed a Form 1040A, subtract the amount on line 14b from the corresponding amounts on line 14a, and enter that figure.

VALUE OF HOUSEHOLD ASSETS

7.) If the value of the assets listed , owned by each adult member of the household is LESS THAN $100,000, circle "Yes;" otherwise, circle "No."

CERTIFICATION

8.) Be sure to read the certification statement very carefully, and sign and date the application in the spaces provided.

9.) Attach copies of:

a.)The front page of federal income tax returns for all adult members of the household

b.) Schedule C and/or F of federal income tax returns, if applicable (see item 4, above)

c.) The property tax bill on the subject property

d.) Property tax payment receipts on the subject property

e.) A copy of the year-end statement of social security, pension and all other income received for any adult member of the household who was not required to file a federal income tax return

CALL DEPARTMENT OF REVENUE FOR ASSISTANCE: 307-777-7320.