MISSOURI DEPARTMENT OF

REVENUE



Form MO-1040

Individual Income Tax Long Form



Complete a New, Simplified MO W-4

We encourage you to review and complete a new, simplified W-4 each year, especially if your filing status has changed. Request the new, simplified W-4, from your employer or print it at https://dor.mo.gov/forms.



Sign up to Receive Return Status Updates

Get text or email notifications each time the status of your return changes. See page 4 for more information.





File Electronically

Electronic filing is fast and easy. See page 2 for details.

Tax Deadline is April 15. See page 3 for extensions.



Electronic Filing Options for Federal and State E-File - Missouri, in cooperation with the Internal Revenue Service (IRS), offers a joint federal and state filing of individual income tax returns. There are two ways that you may e-file your federal and state income tax returns:

- You can electronically file your federal and state returns online from websites provided by approved software providers. Many providers offer free filing if you meet certain conditions. A list of approved providers can be found at https://dor.mo.gov/personal/individual/vendors.
 php#freeonline.
- 2) You can have a tax preparer (if approved by the IRS) electronically file your federal and state returns for you, usually for a fee. A list of approved tax preparers can be found at https://dor.mo.gov/personal/individual/vendors php#freeonline.

BENEFITS OF ELECTRONIC FILING

Convenience: You can electronically file 24 hours a day, 7 days a week. If you electronically file, **DO NOT** mail a copy of your return.

Security: Your tax return information is encrypted and transmitted over secure lines to ensure confidentiality. **Accuracy:** Electronically filed returns have fewer errors than paper returns.

Direct Deposit: You can have your refund directly deposited into your bank account.

Proof of Filing: An acknowledgment is issued when your return is received and accepted.

ASSISTANCE WITH PREPARING YOUR TAX RETURN

There are a large number of volunteer groups in Missouri providing tax assistance to elderly or lower income taxpayers. To locate a volunteer group near you that offers return preparation assistance: call 800-906-9887 or 888-227-7669 or visit https://www.irs.gov/individuals/free-tax-return-preparation-for-you-by-volunteers.

You will find a larger volume of volunteer centers open during the filing season, which is typically January through April.

2D BARCODE RETURNS



If you plan to file a paper return, you should consider 2-D barcode filing. The software encodes all your tax information into a 2-D barcode, which allows your return to be processed with fewer errors compared to traditional paper returns. If you use software to prepare your return, check our website for approved 2-D barcode software companies. Also, check out the Department's fill-in forms that automatically calculate and provide your return with a 2-D barcode. You can have your refund directly deposited into your bank account when you use the Department's fill-in forms.

If your form has a 2-D barcode, mail your return to the Department of Revenue address as indicated below:

Refund returns: P.O. Box 3222, Jefferson City, MO 65105-3222

Refund returns claiming a property tax credit: P.O. Box 3385, Jefferson City, MO 65105-3385

Balance due returns: P.O. Box 3370, Jefferson City, MO 65105-3370

Balance due returns claiming a property tax credit: P.O. Box 3395, Jefferson City, MO 65105-3395

Visit our website at http://dor.mo.gov/personal/taxselector to use the Department's form selector to obtain specific tax forms.

DO YOU HAVE THE RIGHT BOOK?

The Individual Income Tax Return (Form MO-1040) is Missouri's long form. It is a universal form that can be used by any taxpayer.

If you do not have any of the special filing situations described below and you choose to file a paper tax return, try filing a short form. The short forms are less complicated and provide only the necessary information for specific tax filing situations.

You **must** file Form MO-1040 if at least one of the following applies:

1. You or your spouse claim or file:

- a. A pension, social security/social security disability, military exemption, or property tax credit and you also have other special filing situations. (If you do not have any other special filing situations described in this section, you can use the Missouri Individual Income Tax Return or a Property Tax Credit Claim Pension Exemption (Form MO-1040P) to file your taxes and claim the property tax credit/pension exemption.);
- **b.** Miscellaneous Income Tax Credits (taken on Form MO-TC);
- A credit for payment made with the filing of an Application for Extension of Time to File (Form MO-60);
- **d.** Income from another state;
- e. An amended return;
- f. A nonresident entertainer or a professional athlete;
- g. A fiscal year return;
- h. A nonresident military servicemember stationed in Missouri and you or your spouse earned non-military income while in Missouri:
- i. A deduction for other federal tax (from Federal Form 1040 and applicable schedules):
 - Schedule 2, Line 3
 - Schedule 3, Part 1, Line 1
 - Schedule 2. Part 2. Line 6
 - Schedule 2, Part 2, Line 7b
 - Schedule 2, Part 2, Line 10;
- j. A Health Care Sharing Ministry deduction;
- k. Any military income earned while on active duty;
- I. The Bring Jobs Home tax deduction;
- m. The Transportation Facilities deduction; or
- n. First Time Home Buyers Bank.

2. You have any of the following Missouri modifications:

- **a.** Positive or negative adjustments from partnerships, fiduciaries, S corporations, or other sources;
- Nonqualified distribution received from the Missouri Savings for Tuition Program (MOST), Missouri Education Deposit Program, or other qualified 529 plan;
- Nonqualified distribution received from or exempt contributions made to Achieving a Better Life Experience (ABLE) program;
- d. Interest on federal exempt obligations;
- e. Interest on state and local obligations;
- f. Capital gain exclusion;
- g. Exempt contributions made to (or earnings from) the Missouri Savings for Tuition Program (MOST), Missouri Education Deposit Program, or other qualified 529 plans;
- **h.** Enterprise zone or rural empowerment zone modification;
- i. Negative adjustments related to bonus depreciation;
- j. Net Operating Loss (NOL) carryback/carryforward;
- **k.** Combat pay included in federal adjusted gross income;
- I. Agriculture disaster relief income; or
- m. Employee Stock Ownership Plan (ESOP).
- 3. You owe a penalty for underpayment of estimated tax.
- You owe tax on a lump sum distribution included on Federal Form 1040, U.S. Tax Return for Seniors (Federal Form 1040-SR), Line 12a.
- 5. You owe recapture tax on low income housing credit.

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IMPORTANT FILING INFORMATION

This information is for guidance only and does not state the complete law.

FILING REQUIREMENTS

You **do not** have to file a Missouri return if you are not required to file a federal return. If you are required to file a federal return, you may not have to file a Missouri return if you:

- a. are a resident and have less than \$1,200 of Missouri adjusted gross income;
- **b.** are a nonresident with less than \$600 of Missouri income: or
- c. have Missouri adjusted gross income less than the amount of your standard deduction for your filing status.

Note: If you are not required to file a Missouri return, but you received a Wage and Tax Statement (Form W-2) stating you had Missouri tax withheld, you must file your Missouri return to get a refund of your Missouri withholding. If you are not required to file a Missouri return and you do not anticipate an increase in income, you may change your Employee Withholding Allowance Certificate (Form MO W-4) to "exempt" so your employer will not withhold Missouri tax.

WHEN TO FILE

Calendar year taxpayers must file no later than **April 15, 2020**. Late filing will subject taxpayers to charges for interest and addition to tax. Fiscal year filers must file no later than the 15th day of the fourth month following the close of their taxable year.

EXTENSION OF TIME TO FILE

You are not required to file an extension if you do not expect to owe additional income tax or if you anticipate receiving a refund. If you wish to file a Missouri extension, and do not expect to owe Missouri income tax, you may file an extension by filing Form MO-60. An automatic extension of time to file will be granted until October 15, 2020.

If you receive an extension of time to file your federal income tax return, you will automatically be granted an extension of time to file your Missouri income tax return, provided you do not expect to owe any additional Missouri income tax. Attach a copy of your Application for Automatic Extension of Time To File U.S. Individual Income Tax Return (Federal Form 4868) with your Missouri income tax return when you file.

If you expect to owe Missouri income tax, file Form MO-60 with your payment by the original due date of the return.

Remember: An extension of time to file does not extend the time to pay. A 5 percent Addition to Tax will apply if the tax is not paid by the original return's due date.

LATE FILING AND PAYMENT

Simple interest is charged on all delinquent taxes. The rate will be updated annually and can be found on our website at http://dor.mo.gov/intrates.php.

For timely filed returns, an addition to tax of 5 percent (of the unpaid tax) is added if the tax is not paid by the return's due date.

For returns not filed by the due date, an addition to tax of 5 percent per month (of the unpaid tax) is added for each month the return is not filed. The addition to tax cannot exceed 25 percent.

If you are unable to pay the tax owed in full on the due date, please visit http://dor.mo.gov for your payment options. If you are mailing a partial payment, please use the Individual Income Tax Payment Voucher (Form MO-1040V) found on page 48.

WHERE TO MAIL YOUR RETURN

If you are due a refund or have no amount due, mail your return and all required attachments to: **Department of Revenue, P.O. Box 500, Jefferson City, MO 65106-0500**.

If you have a balance due, mail your return, payment, and all required attachments to: **Department of Revenue, P.O. Box 329 Jefferson City, MO 65107-0329**.

All 2D barcode returns, see page 2.

DOLLARS AND CENTS

Rounding is required on your tax return. Zeros have been placed in the cents columns on your return. For 1 cent through 49 cents, round down to the previous whole dollar amount. For 50 cents through 99 cents, round up to the next whole dollar amount.

Example: Round \$32.49 down to \$32.00

Round \$32.50 up to \$33.00

REPORT OF CHANGES IN FEDERAL TAXABLE INCOME

When your federal taxable income or federal tax liability is changed as a result of an audit or notification by the Internal Revenue Service, or if you file an amended federal income tax return, you must report such change by filing an amended Missouri income tax return with the Department of Revenue within 90 days of the change. Failure to notify the Department of Revenue within the 90 day period extends the statute of limitations to one year after the Department of Revenue becomes aware of such determination. You will be subject to interest and addition to tax if you owe additional tax to Missouri.

AMENDED RETURN

To file an amended individual income tax return, use Form MO-1040. Select the box at the top of the form. Complete Forms MO-1040 and the Individual Income Tax Adjustments (Form MO-A), pages 1-4, using corrected figures. Attach all schedules along with a copy of your federal changes and your Federal Form 1040X.

If you are due a refund, mail to: **Department of Revenue, P.O. Box 500, Jefferson City, MO 65106-0500**.

If you have an amount due, mail to **Department of Revenue, P.O. Box 329, Jefferson City, MO 65107-0329**.

COMPOSITE RETURN

Businesses filing a composite return on behalf of their nonresident partners or shareholders should use Form MO-1040. Attach a schedule listing the name, address, identification number, and amount of each nonresident partner or shareholder's income from Missouri sources to Form MO-1040. Select the composite return box at the top of Form MO-1040. Refer to Missouri Regulation 12 CSR 10-2.190 and the Instructions for Composite Individual Return for

Nonresident Partners or Shareholders (Form 5677) at http://dor.mo.gov/forms for complete filing instructions.

Note: The tax rate for a composite return is 5.4 percent.

FILL-IN FORMS THAT AUTOMATICALLY CALCULATE

Visit https://dor.mo.gov/personal/individual/ to enter your tax information and let the auto calculation form complete the math for you. No calculation errors means faster processing. Just complete, print, sign, and mail the return. These forms contain a 2-D barcode at the top right portion of the form. This allows quicker processing of your return.

MISSOURI RETURN INQUIRY

To check the status of your current year return 24 hours a day, please visit our website at http://dor.mo.gov/returnstatus or call our automated individual income tax inquiry line at (573) 526-8299. To check your return status, you must know the following information:

- 1. the first social security number on the return;
- 2. the filing status shown on your return; and
- 3. the exact amount of the refund or balance due in whole dollars.

Once this information is validated using the Missouri Return Inquiry System on our website, you will be given the option to sign up for text or email notifications. This will allow you to be notified each time the status of your tax return changes as it is being processed by the Department of Revenue

RESIDENT

A resident is an individual who either:

- 1. maintained a domicile* in Missouri or
- did not maintain a domicile in Missouri but did have permanent living quarters and spent more than 183 days of the taxable year in Missouri.

Exception: An individual domiciled in Missouri who did not maintain permanent living quarters in Missouri, did maintain permanent living quarters elsewhere, and spent 30 days or less of the taxable year in Missouri is not a resident.

Domicile: The place an individual intends to be his or her permanent home; a place that he or she intends to return to when absent. A domicile, once established, continues until the individual moves to a new location with the true intention of making his or her permanent home there. An individual can have only one domicile at a time.

NONRESIDENT

A nonresident is an individual who does not meet the definition of resident. If required to file, nonresidents with income from another state must use the Missouri Income Percentage (Form MO-NRI) to determine income percentages.

NONRESIDENT ALIEN SPECIAL FILING INSTRUCTIONS

If you do not have a social security number, enter your identifying number in the social security number space provided. Enter on Form MO-1040, Line 1 the amount from U.S. Nonresident Alien Income Tax Return (Federal Form 1040NR), Line 35 or U.S. Income Tax Return for Certain Nonresident Aliens With No Dependents (Federal Form 1040NR-EZ), Line 10.

Filing Status

If you selected Box 2 on the Federal Form 1040NR; or Box 1 on Federal Form 1040NR-EZ, select **Single** as your filing status on Form MO-1040.

If you selected Box 5 and did not claim your spouse as an exemption on Federal Form 1040NR, or if you selected Box 2 on Federal Form 1040NR-EZ, select **Married Filing Separate** as your filing status on Form MO-1040.

If you selected Box 6 on Federal Form 1040NR, select **Qualifying Widow** as your filing status on Form MO-1040.

Itemized Deductions

Nonresident aliens who are required to itemize their deductions for federal purposes must also itemize deductions on their Missouri return. Visit http://dor.mo.gov/personal/individual/ for more detailed information and Frequently Asked Questions.

Federal Tax Deduction

Enter on Form MO-1040, Line 9 the amount from Federal Form 1040NR, Line 53 less Lines 43, 44, 65, and any amount from Health Coverage Tax Credit (Federal Form 8885) included in Line 69; or the amount from Federal Form 1040NR-EZ, Line 15.

Enter on Form MO-1040, Line 10, the amount from Federal Form 1040NR, Lines 43, 44, 46, 57, and 59b.

For all other lines of Form MO-1040, see instructions beginning on page 6.

PART-YEAR RESIDENT

All income earned while living in Missouri is taxable to Missouri. A part-year resident may determine to be taxed as a resident for the entire year by using the Credit for Income Taxes Paid to Other States or Political Subdivisions (Form MO-CR) to claim a credit for taxes paid to another state on the income earned while living in Missouri. Or a part-year resident may use Missouri Income Percentage (Form MO-NRI) to determine their income based on the income earned while living in Missouri.

MILITARY PERSONNEL

The Servicemembers Civil Relief Act prevents military personnel from being taxed on military income by any state other than their home of record state. The Military Spouses Residency Relief Act prevents income earned by servicemembers' spouses from being taxed by any state other than their state of residence. If you are a member of any active duty component of the Armed Forces of the United States, you may be eligible for an income deduction. See Line 17 instructions on page 8 for more information or visit http://dor.mo.gov/military/.

Missouri Home of Record

If you entered the Armed Forces in Missouri, your home of record is presumed to be Missouri and you are presumed to be domiciled in Missouri.

Missouri Home of Record (Stationed Outside Missouri)

You are considered a **nonresident** for tax purposes if you:

- maintained no permanent living quarters in Missouri during the year;
- **b.** maintained permanent living quarters elsewhere; and
- c. did not spend more than 30 days of the year in Missouri

Therefore, your military pay, interest & dividend income are not taxable to Missouri. Complete Form MO-NRI and attach to Form MO-1040.

Note: If your spouse remains in Missouri more than 30 days while you are stationed outside Missouri, your total income, including your military pay, is taxable to Missouri. If you are the spouse of a

military servicemember, are living outside of Missouri and Missouri is your state or residence, any income you earn is taxable to Missouri. If you earn more than \$1,200 you must file Form MO-1040.

Missouri Home of Record (Stationed in Missouri)

If your home of record is Missouri and you are stationed in Missouri due to military orders, all of your income, including your military pay, is taxable to Missouri.

Missouri Home of Record (Entering or Leaving the Military)

If you are entering or leaving the military, Missouri is your home of record, and you spend more than 30 days in Missouri, your total income, including your military pay, is taxable to Missouri.

Non-Missouri Home of Record (Stationed In Missouri)

The military pay of a nonresident military personnel stationed in Missouri due to military orders is not taxable to Missouri. If you are a servicemember and earned only military income while stationed in Missouri, complete a No Return Required-Military Online Form by visiting mytax.mo.gov/rptp/portal/business/military-noreturn.

If you are a military servicemember and earned \$600 or more in Missouri in non-military income, this non-military income is taxable to Missouri and cannot be subtracted from your federal adjusted gross income on your Form MO-1040.

If you are the spouse of a military servicemember, are in Missouri because the military servicemember is stationed in Missouri on military orders, and your state of residence is another state, any income earned by you is not taxable to Missouri. However, if you earn more than \$600 you must file Form MO-1040 and provide verification of your state of residence. Acceptable verification may include any of the following from your state of residence: a copy of your 2019 state income tax return, 2019 property tax receipts, current driver license, vehicle registration or voter identification card. You must report the military pay of the servicemember and your income on Form MO-A, Part 1, Line 10, as a "Military (Nonresident)" subtraction to your federal adjusted gross income. For additional information, visit https://dor.mo.gov/military/.

OTHER STATE INCOME

You must begin Form MO-1040 with your total federal adjusted gross income, as reported on your federal return. Lines 1 through 27 of the return are computed as if you are a full-year resident. Tax (Line 26) is computed on all your income, and may then be reduced by a resident credit (Line 27), or by a Missouri income percentage (Line 28). The result is a prorated Missouri tax liability (Line 27) based only on the income earned in Missouri. See page 9, Lines 27 and 28.

DECLARATION OF ESTIMATED TAX

Residents and nonresidents are required to make a declaration of estimated tax if their Missouri estimated tax is expected to be at least \$100. If you are required to make estimated tax payments, you must do so by remitting your tax payment along with an Estimated Tax Declaration for Individuals (Form MO-1040ES).

ADDRESS CHANGE

Visit http://dor.mo.gov/personal/individual/ to obtain an official address change form to change your address with the Department. Address change requests should be mailed to: **Department of Revenue, P.O. Box 2200, Jefferson City, MO 65105-2200**. This will help forward any refund check or correspondence to your new address.

You may complete our online address change form by visiting http://dor.mo.gov/howdoi/addchange.php.

CONSUMER'S USE TAX

Use tax is imposed on the storage, use or consumption of tangible personal property in this state. The state use tax rate is 4.225 percent. Cities and counties may impose an additional local use tax. Use tax does not apply if the purchase is subject to Missouri sales tax or otherwise exempt. A purchaser is required to file a use tax return if the cumulative purchase on which tax was not paid to the state exceeds \$2,000 in a calendar year. You can use the Individual Consumer's Use Tax Return (Form 4340). The due date for Form 4340 is April 15, 2020.

FORM MO-1040

Important: Complete your federal return first. If you are filing a fiscal year return, indicate the beginning and ending dates on the line provided near the top of Form MO-1040.

FILING STATUS

Select the same filing status on your Missouri return as claimed on the federal return. If on your federal return you selected the checkbox "Someone can claim you as a dependent," you will select "claimed as a dependent" on the Form MO-1040.

AGE 62 THROUGH 64

If you or your spouse were ages 62, 63, or 64 by December 31, 2019, select the appropriate box.

AGE 65 OR OLDER OR BLIND

If you or your spouse were age 65 or older or blind and qualified for these deductions on your 2019 federal return, select the appropriate boxes.

100 PERCENT DISABLED PERSON

You may select the 100 percent disabled box if you or your spouse are unable to engage in any substantial gainful activity by reason of any medically determinable physical or mental impairment that can be expected to result in death or has lasted or can be expected to last of a continuous period of not less than 12 months. A claimant is not required to be gainfully employed prior to such disability to qualify for a property tax credit.

Visit http://dor.mo.gov/personal/ptc to learn more about the property tax credit form.

NON-OBLIGATED SPOUSE

You may select the non-obligated spouse box if your spouse owes the state of Missouri any child support payments, back taxes, student loans, etc., and you do not want your portion of the refund used to pay the amounts owed by your spouse. Debts owed to the Internal Revenue Service (IRS) are excluded from the non-obligated spouse apportionment.

NAME AND ADDRESS

Print or type your name(s), address, and social security number(s) in the spaces provided on the return.

DECEASED TAXPAYER

If the taxpayer or spouse died in 2019, select the appropriate box. If a refund is due to a deceased taxpayer, attach a copy of Statement of Person Claiming Refund Due a Deceased Taxpayer (Federal Form 1310) and death certificate.

FIGURE YOUR MISSOURI ADJUSTED GROSS INCOME

Missouri requires the division of income between spouses. Taxpayers filing a combined return pay less tax by dividing the income between spouses and then determining the tax amount for each person's income. You must begin your Missouri return with your total federal adjusted gross income, even if you have income from a state other than Missouri.

LINE 1 - FEDERAL ADJUSTED GROSS INCOME

If your filing status is "married filing combined" and both spouses are reporting income, use the worksheet on page 7 to split income between you and your spouse. The combined income for you and your spouse must equal the total federal adjusted gross income you reported on your federal return. For all other filing statuses, use the chart below to determine your federal adjusted gross income.

If you include loss(es) of \$1,000 or more on Line 1, you must attach a copy of Federal Form 1040 or Federal Form 1040-SR (pages 1 and 2).

Federal Form	Line Numbers
Federal Form 1040 or	l in a Ola
Federal Form 1040-SR	Line 8b
Federal Form 1040X	Line 1

Missouri Modifications

Before completing Lines 2, 3, and 4, read the Information to Complete Form MO-A, Part 1, pages 12 through 16.

LINE 2 - TOTAL ADDITIONS

Enter the total additions amount from Form MO-A, Part 1, Line 7.

LINE 4 - TOTAL SUBTRACTIONS

Enter the total subtractions amount from Form MO-A, Part 1, Line 18.

LINE 7 - INCOME PERCENTAGES

To calculate your income percentage for Line 7, complete the chart below if both spouses have income.

Yourself Line 5Y	_ ÷ Line 6	_=
Spouse		
Line 5S	_ ÷ Line 6	_=

The total entered on Line 7 must equal 100 percent - round to the nearest percentage. For example, 84.3 percent would be shown as 84 percent and 97.5 percent would be shown as 98 percent. Lines 7Y and 7S must equal 100 percent.

Note: If one spouse has negative income and the other spouse has positive income (Ex: your income is -\$15,000 and your spouse's income is \$30,000), enter zero percent on Line 7Y and 100 percent on Line 7S. If nothing is entered, the Department will consider this to be 100 percent.

FIGURE YOUR TAXABLE INCOME

LINE 8 - PENSION AND SOCIAL SECURITY/SOCIAL SECURITY DISABILITY/MILITARY EXEMPTION

If you or your spouse received a public, private, or military pension, social security or social security disability, complete Form MO-A, Part 3. Enter the amount from Form MO-A, Part 3, Total Exemption on MO-1040, Line 8. Attach a copy of your federal return (pages 1 and 2), Distributions From Pensions, Annuities, Retirement or Profit-Sharing Plans, IRAs, Insurance Contracts, etc. (Form 1099-R), and Social Security Benefit Statement (SSA-1099).

LINE 9 - TAX FROM FEDERAL RETURN

Use the chart in next column to locate your tax on your federal return. **Do not enter your federal income tax withheld as shown on your Form(s) W-2 or federal return.**

If you have an earned income credit, you must subtract the credit from the tax on your federal return. If a negative amount is calculated, enter "O". If you used a method other than the federal tax table to determine your federal tax, attach the appropriate schedule.

Federal Forms	Line Numbers		
1040 1040-SR	 Federal Form 1040 or 1040-SR Line 14 less Federal Form 1040 or 1040-SR Line 18a ar 18c; Schedule 2, Part 1, Line 3; Schedule 3, Part 2, Line 9, and any amoun from Form 8885 on Schedule 3, Part 2, Line 13. 		
Line 8 less Lines 14 and 15, except amounts Forms 2439 and 4136.			

Note: At the time the Department printed their tax booklets, the Internal Revenue Service had not finalized the 2019 federal income tax forms.

LINE 10 - OTHER FEDERAL TAX

Enter the total amount of:

- Schedule 2, Part 1, Line 3;
- Schedule 3, Part 1, Line 1;
- Schedule 2. Part 2. Line 6:
- · Schedule 2, Part 2, Line 7b; and
- Any recapture taxes included on Schedule 2, Part 2, Line 10.

For amended returns enter the other taxes reported on Line 10 of Federal Form 1040X except: do not include self-employment tax, FICA tax, or railroad retirement tax on this line. Attach a copy of your federal return (pages 1 and 2) and applicable schedules. Attach a copy of Federal Form(s) 4255, 8611, or 8828 if claiming recapture taxes.

Worksheet for Line 1 - Instructions for Completing the Adjusted Gross Income Worksheet

Missouri law requires a combined return for married couples filing together. A combined return means taxpayers are required to split their total federal adjusted gross income (including other state income) between spouses when beginning the Missouri return.

Splitting the income can be as easy as adding up your separate Form(s) W-2 and Miscellaneous Income (Federal Form) 1099. Or it may require allocating to each spouse the percentage of ownership in jointly held property, such as businesses, farm operations, dividends, interest, rent, and capital gains or losses. State refunds should be split based on each spouse's 2018 Missouri tax withheld, less each spouse's 2018 tax liability. The result should be each spouse's portion of the 2018 refund. Taxable social security benefits must be allocated by each spouse's share of the benefits received for the year.

The worksheet below lists income that is included on your federal return, along with federal line references. Find the lines that apply to your federal return, split the income between you and your spouse, and enter the amounts on the worksheet. When you have completed the worksheet, transfer the amounts from Line 18 to Form MO-1040, Lines 1Y and 1S.

Note: Remember, the incomes listed separately on Line 18 of this worksheet must equal your total federal adjusted gross income when added together.

Adjusted Gross Income Worksheet for Combined Return	Federal Form 1040 or Federal Form 1040-SR	Y - Yourself		S - Spouse
1. Wages, salaries, tips, etc.	1	00	1	00
2. Taxable interest income	2b	00	2	00
3. Dividend income	3b	00	3	00
4. State and local income tax refunds (from Schedule 1, Part 1)	1	00	4	00
5. Alimony received (from Schedule 1, Part 1)	2a	00	5	00
6. Business income or loss (from Schedule 1, Part 1)	3	00	6	00
7. Capital gain or loss	6	00	7	00
8. Other gains or losses (from Schedule 1, Part 1)	4	00	8	00
9. Taxable IRA distributions	4b	00	9	00
10. Taxable pensions and annuities	4d	00	10	00
11. Rents, royalties, partnerships, S corporations, trusts, etc. (from Schedule 1, Part 1)	5	00	11	00
12. Farm income or loss (from Schedule 1, Part 1)	6	00	12	00
13. Unemployment compensation (from Schedule 1, Part 1)	7	00	13	00
14. Taxable social security benefits	5b	00	14	00
15. Other income (from Schedule 1, Part 1)	8	00	15	00
16. Total (add Lines 1 through 15)		00	16	00
17. Less: federal adjustments to income (from Schedule 1, Part 2)	22	00	17	00
18. Federal adjusted gross income (Line 16 less Line 17) Enter amounts here and on Lines 1Y and 1S, Form MO-1040	8b	00	18	00

LINE 12 - FEDERAL TAX PERCENTAGE

This percentage is based on the Missouri Adjusted Gross Income reported on Line 6. See below examples: Example 1: If Line 6 is \$22,450, enter 35% on Line 12. Example 2: If Line 6 is \$58,750, enter 15% on line 12.

Missouri Adjusted Gross Income Range (Line 6):	Federal Tax Percentage:
\$25,000 or less	35%
\$25,001 to \$50,000	25%
\$50,001 to \$100,000	15%
\$100,001 to \$125,000	5%
\$125,001 or more	0%

LINE 13 - FEDERAL INCOME TAX DEDUCTION

Multiply Line 11 by percentage on Line 12. If you selected any filing status other than married filing combined on the MO-1040, your federal tax deduction may not exceed \$5,000. If you selected married filing combined, your federal tax cannot exceed \$10,000.

LINE 14 - STANDARD OR ITEMIZED DEDUCTIONS

Standard Deductions

If you claimed the standard deduction on your federal return, enter the standard deduction amount for your filing status. The amounts are listed on Form MO-1040, Line 14. **Use the chart on the next page to determine your standard deduction if you or your spouse selected any of the boxes for 65 or older, blind or claimed as a dependent.**

Federal Form	Line Numbers
Federal Form 1040 Federal Form 1040-SR	Line 9
Federal Form 1040X	Line 2

Itemized Deductions

If you itemized on your federal return, you may want to itemize on your Missouri return or take the standard deduction, whichever results in a higher deduction. If you were **required** to itemize on your federal return, you must itemize on your Missouri return. To figure your itemized deductions, complete the Form MO-A, Part 2. Attach a copy of your federal return (pages 1 and 2) and Federal Schedule A.

LINE 15 - LONG-TERM CARE INSURANCE DEDUCTION

If you paid premiums for qualified long-term care insurance in 2019, you may be eligible for a deduction on your Missouri income tax return. Qualified long-term care insurance is defined as insurance coverage for at least 12 months for long-term care expenses should such care become necessary because of a chronic health condition or physical disability, including cognitive impairment or the loss of functional capacity, thus rendering an individual unable to care for themselves without the help of another person.

Complete the worksheet in the right hand column only if you paid premiums for a qualified long-term care insurance policy; and the policy is for at least 12 months coverage.

Note: You cannot claim a deduction for amounts paid toward death benefits or extended riders.

Worksheet for Long-Term Care Insurance Deduction

A. Enter the amount paid for qualified long-term If you itemized on your federal return and your federal itemized deductions included medical expenses, go to Line B. If not, skip to H. B. Enter the amount from Federal **C.** Enter the amount from Federal D. Enter the amount of qualified long-term care included on Line C.........D) \$____ E. Subtract Line D from Line C E) \$____ F. Subtract Line E from Line B (if the amount G. Subtract Line F from Line A..... G) \$_____ H. Enter Line G (or Line A if you did not have to complete Lines B through G) Attach a copy of your Federal Form 1040 or 1040-SR (pages 1 and 2) and Federal Schedule A (if you itemized your deductions).

LINE 16 - HEALTH CARE SHARING MINISTRY

If you made contributions to a qualifying health care sharing ministry, enter the amounts you paid in 2019 on Line 16. **Do not include amounts excluded from your federal taxable income.**

LINE 17 - MILITARY INCOME DEDUCTION

Enter the amount of military income earned as a member of any **active duty** component of the Armed Forces of the United States. This includes being ordered to federal active duty status under 10 USC or 32 USC, participating in Annual Training (typically two weeks a year), and participating in other active training or schools, except for Inactive Duty for Training. This amount may not include military income earned during State Active Duty. This amount must be included in your federal adjusted gross income and not previously taken as a deduction or subtraction.

You should submit appropriate documentation to verify your military income deduction. Please include copies of all your Leave and Earnings Statement(s) which validate how long you were on active duty for training or annual training and the amount you earned on active duty for training or on annual training.

Failure to attach the requested documentation may result in the disallowance of this deduction. If you have additional questions about this deduction, you may contact the Department's military liaison at military@dor.mo.gov.

LINE 18 - BRING JOBS HOME DEDUCTION

If you or your spouse accrued expenses associated with relocating a business to Missouri, you may be eligible for this deduction (if approved by the Department of Economic Development).

The deduction is equal to 50 percent of the eligible in-sourcing expenses and cannot exceed your Missouri adjusted gross income.

For additional information, please visit http://ded.mo.gov or contact the Missouri Department of Economic Development at P.O. Box 118, Jefferson City MO 65102-0118.

LINE 19 - TRANSPORTATION FACILITIES DEDUCTION

Taxpayers must receive approval from the Missouri Department of Economic Development to claim one of the following Transportation Facilities deductions: A) Port Cargo Expansion, B) International Trade Facility; and C) Qualified Trade Activities.

Select the appropriate deduction and enter the approved amount on Line 19. Note: The Qualified Trade Activities deduction cannot exceed 50 percent of the taxpayer's Missouri adjusted gross income.

LINE 20 - FIRST-TIME HOME BUYERS DEDUCTION

You may deduct contributions to one or more first time home buyer account(s) and the interest accruing on these account(s). Complete a Missouri Form 5766 for each account and enter the applicable amount(s) on Lines 20a or 20b.

Line 20a: Enter the amount of the contribution deduction to a first time home buyer account(s), not to exceed \$800 (\$1,600 for married filing combined returns) from Form(s) 5766, Deduction Section. Line A.

Line 20b: Enter the amount of accrued interest on the first time home buyer account(s) from Form(s) 5766, Deduction Section, Line B.

Line 20: Enter the sum of Lines 20a and 20b in Line 20.

LINE 22 - SUBTOTAL

Subtract Line 21 from Line 6. If less than zero, enter "O". **Do not enter a negative amount.**

LINE 24 - ENTERPRISE ZONE INCOME OR RURAL EMPOWERMENT ZONE MODIFICATION

To claim the Enterprise Zone Income or Rural Empowerment Zone Modification, you must first receive notification of approval from the Department of Economic Development.

Enterprise Zone Income Modification

If you or your spouse have exempt income from a business facility located in an enterprise zone that has been approved by the Department of Economic Development, enter one-half of the Missouri taxable income attributed to the new business facility in the enterprise zone. Refer to the Worksheet for Calculating Business Facility Credit, Enterprise Zone Modification and Enterprise Zone Credit (Form 4354) on Line 24.

Rural Empowerment Zone Modification

If you or your spouse have exempt income from a new business facility located within a rural empowerment zone that has been approved by the Department of Economic Development, enter the Missouri taxable income attribute to a new business facility in a rural empowerment zone on Line 24.

Visit http://ded.mo.gov for additional information on either modification, or contact the Department of Economic Development, Incentives Section, P.O. box 118, Jefferson City, MO 65102-0118.

FIGURE YOUR TAX

LINE 26 - MISSOURI TAX

Calculate your tax by using your taxable income from Form MO-1040, Line 25Y and 25S, the Tax Rate Chart (page 22, Section A), and Tax Calculation Worksheet (page 22, Section B).

LINE 27 AND 28 - RESIDENT CREDIT OR MISSOURI INCOME PERCENTAGE

A taxpayer **filing as a resident** who paid taxes to another state or political subdivision may take a credit for tax paid by using Form MO-CR. A taxpayer **filing as a nonresident** may calculate their Missouri income percentage by using the Form MO-NRI. A Form MO-CR and a Form MO-NRI may not be used by the same taxpayer on Form MO-1040. If filing a combined return, one spouse may use Form MO-NRI and the other spouse may elect to use Form MO-CR

See lines 27 and 28. For more information and examples, visit http://dor.mo.gov/personal/nonresident. Attach a copy of your other state or political subdivision's return.

LINE 27 - MISSOURI RESIDENT(S)

You should take the resident credit (Form MO-CR) if:

- a. you are a full-year Missouri resident; and
- **b.** you paid income tax to other state(s) or political subdivisions.

LINE 28 - NONRESIDENT(S)

You should determine your Missouri income percentage (Form MO-NRI) if:

- a. you are a nonresident; and
- **b.** you had income from other state(s) or political subdivisions.

The amount on Line 28 should be 100 percent unless you use Form MO-NRI and determine a lesser percentage. If you do not enter a percentage on Line 28, your tax will be based on all of your income, regardless of where it was earned.

LINE 27 OR 28 - PART-YEAR RESIDENT(S)

You may take either the resident credit or the Missouri income percentage. Complete both Forms MO-CR and MO-NRI and use the one that is to your advantage. All income earned while living in Missouri is taxable to Missouri. **Attach a copy of your other state or political subdivision's return.**

LINE 30 - TAX ON LUMP SUM DISTRIBUTIONS AND RECAPTURE TAX ON MISSOURI LOW INCOME HOUSING CREDITS

Lump Sum Distributions

A taxpayer who receives a lump sum distribution may be required to file a Lump Sum Distribution (Federal Form 4972). Because this income is not included in your Missouri adjusted gross income, a separate calculation must be made to compute the Missouri tax on this distribution.

You are subject to the tax if your state of legal residence was Missouri at the time you received the lump sum distribution. The amount of tax is 10 percent of your federal tax liability on the distribution received in 2019. You must compute this tax by multiplying the amount shown as tax on Federal Form 4972 by 10 percent.

For example, if your Federal Form 1040, Line 12a includes \$1,000 tax as a result of Federal Form 4972, the amount of tax on Form MO-1040 would be \$100. Select the Lump Sum Distribution box on Line 30. **Attach a copy of Federal Form 4972.**

Recapture Tax

If you are required to recapture a portion of any federal low income housing credits taken on a low income housing project, you are also required to recapture a portion of any state credits taken. The state recapture amount is the proportion of the state credit that equals

the proportion the federal recapture amount bears to the original federal low income housing credit amount. Attach a copy of your federal return (pages 1 and 2) and Federal Form 8611.

FIGURE YOUR PAYMENTS AND CREDITS

LINE 33 - MISSOURI WITHHOLDING

Include only Missouri withholding as shown on your Form(s) W-2, 1099, or 1099-R. Do not include withholding for federal taxes, local taxes, city earnings taxes, other state's withholding, or payments submitted with a Statement of Income Tax Payments for Nonresident Individual Partners or S Corporation Shareholders (Form MO-2NR) or a Statement of Income Tax Payments for Nonresident Entertainers (Form MO-2ENT). Attach a copy of all Form(s) W-2 and 1099. See Diagram 1, Form W-2, on page 22.

LINE 34 - ESTIMATED PAYMENTS

Include any estimated tax payments made on your 2019 return and any overpayment applied from your 2018 Missouri return.

LINE 35 - NONRESIDENT PARTNER OR S CORPORATION SHAREHOLDER TAX WITHHELD

Include the payments from your distributive share by the partnership or S corporation, if you are a nonresident partner or S corporation shareholder as shown on Form(s) MO-2NR and the Nonresident Partnership Form (Form MO-NRP). **Attach Form(s) MO-2NR and MO-NRP**.

LINE 36 - NONRESIDENT ENTERTAINER TAX WITHHOLDING

Include your share of the payments from gross earnings as a nonresident entertainer, as shown on Form(s) MO-2ENT, Line 7. Attach a schedule showing the date(s) and place(s) of the performance(s), the nonresident entertainer entity's name, and how your share of the amount paid was calculated. **Attach Form(s) MO-2ENT.**

LINE 37 - EXTENSION OF TIME TO FILE

If you filed for an extension of time to file, enter on Line 37 the amount you paid to the Department of Revenue with Form MO-60.

LINE 38 - MISCELLANEOUS TAX CREDITS

You may be eligible for certain tax credits. The total amount of tax credit is computed by completing Form MO-TC. Enter the total tax credit amount from Form MO-TC, Line 13 on Form MO-1040, Line 38.

Attach Form MO-TC, along with any applicable schedules, certificates, and federal form(s). You can find a list of available credits and the agency to contact for information, forms, and approval to claim each credit on the Form MO-TC, located on page 37.

LINE 39 - PROPERTY TAX CREDIT

Complete the Property Tax Credit Schedule (Form MO-PTS) to determine the amount of your property tax credit. See information to complete Form MO-PTS on pages 44-47.

LINE 41 - AMENDED RETURN ONLY: PAYMENT ON ORIGINAL RETURN

Enter any payment(s) applied to your original filed return, including any penalties and interest.

LINE 42 - AMENDED RETURN ONLY: OVERPAYMENT ON ORIGINAL RETURN

Enter the overpayment claimed or adjusted on your original return including interest.

INDICATE THE REASON FOR AMENDING YOUR RETURN:

Select the box relating to why you are filing an amended return.

- Select **Box A** (federal audit) if you have knowledge or have received a notice that your federal return you previously filed was incorrect, or if the Internal Revenue Service (IRS) adjusted your original return. You must attach a copy of your amended federal return or a copy of your revenue agent's report. Enter the month, day, and year your audit was finalized.
- Select Box B if you have a Net Operating Loss (NOL) carryback on your amended return. Indicate the year your loss occurred.
- Select Box C if you have an investment tax credit carryback on your amended return. Indicate the year your credit occurred.
- Select Box D if you are filing an amended Missouri return as a result of filing an amended federal return. Enter the month, day, and year you filed your amended federal return.

FIGURE YOUR REFUND OR AMOUNT DUE

LINE 44 - OVERPAYMENT

If Line 40 is larger than Line 32, or on an amended return, Line 43 is larger than Line 32, enter the difference (overpayment) on Line 44. All or a portion of an overpayment can be refunded to you.

LINE 45 - APPLY OVERPAYMENT TO NEXT YEAR'S TAXES

You may apply any portion of your refund to next year's taxes.

LINE 46 - TRUST FUNDS

You may donate part or all of your overpaid amount or contribute additional payments to any of the trust funds listed on Form MO-1040 or any two additional trust funds.

Children's Trust Fund - Children's Trust Fund, Missouri's Foundation for Child Abuse Prevention, is a non-profit organization dedicated to the vision of children free to grow and reach their full potential in a nurturing and healthy environment free from child abuse and neglect. For more information please contact the Children's Trust Fund www.ctf4kids.org or call 888-826-5437. (Minimum contribution: \$2, or \$4 if married filing combined)

Veterans Trust Fund - The Missouri Veterans
Commission's Veterans Trust Fund is a means by which
individuals and corporations may donate money to
expand and improve services to veterans in Missouri.
Contributions may be made at any time directly to: Veterans
Trust Fund c/o The Missouri Veterans Commission, P.O. Drawer
147, Jefferson City, MO 65102-0147 or call (573) 751-3779.
(Minimum contribution: \$2, or \$4 if married filing combined)

Elderly Home Delivered Meals Trust Fund - The Elderly Home Delivered Meals Trust Fund supports the home delivered meals program for Missouri's home-bound senior citizens, helping them to continue to live independently in their homes. The need for home delivered meals increases yearly

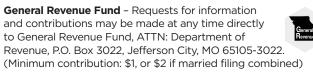
as persons are living longer and may need assistance. Please visit http://health.mo.gov/seniors/aaa/index.php for more information. (Minimum contribution \$2, or \$4 if married filling combined)

Missouri National Guard Trust Fund - The Missouri
National Guard Trust Fund expands the capability
to provide and coordinate Military Funeral Honors
Ceremonies for veterans of Missouri and veterans buried
in Missouri who have servedtheir country in an honorable
manner. Contributions may be made at any time directly to Missouri
National Guard Trust Fund, ATTN: JFMO-JI/SSH, 2302 Militia Drive,
Jefferson City, MO 65101-1203 or call (573) 638-9663. (Minimum
contribution: \$2, or \$4 if married filing combined)

Workers' Memorial Fund – This fund has been established to create a permanent memorial for all workers who suffered a job related death or injuries that resulted in a permanent disability while on the job in Missouri. Requests for information and contributions may be made at any time to: Workers' Memorial Fund, Attn: Director's Office, 412 E Dunklin St., Jefferson City, MO 65101. (Minimum contribution: \$1, or \$2 if married filing combined)

Childhood Lead Testing Fund - Activities supported by this fund ensure that Missouri children at risk for lead poisoning are tested and receive appropriate follow-up activities to protect their health and well being from the harmful effects of lead. For more information please contact the Missouri State Public Health Laboratory at (573) 751-3334, or e-mail labweb1@health.mo.gov. (Minimum contribution: \$1, or \$2 if married filing combined)

Missouri Military Family Relief Fund - For more information, please contact: Missouri Military Family Relief Fund, 2302 Militia Drive, ATTN: JFMO-J1/SS, Jefferson City, MO 65201-1203. (Minimum contribution: \$1, or \$2 if married filing combined)



Organ Donor Program Fund - Contributions support organ and tissue donation education and registry operation. For more information, please contact:

Missouri Department of Healthand Senior Services,
Organ and Tissue Donor Program, P.O. Box 570, Jefferson City, MO 65102-0570, or call 888-497-4564. (Minimum contribution: \$2, or \$4 if married filing combined).

Kansas City Regional Law Enforcement Memorial
Foundation Fund - The Regional Law Enforcement
Memorial Garden honors and celebrates the men and
women who have laid down their lives in the line of
duty. Donations can be made directly to Kansas City Regional Law
Enforcement Memorial Foundation Fund at 527 W 39th Street
(132.24 mi) Kansas City, MO 64111. (Minimum contribution: \$1, or \$2
if married filing combined).

Soldiers Memorial Military Museum in St. Louis
Fund- Supports Soldiers Memorial Military Museum
in honoring military service members, veterans, and
their families, and sharing St. Louis's involvement in
the nation's military history from the American Revolution through
today. Donations can be made directly to Soldiers Memorial
Military Museum Fund at P.O. Box 775460 1315 Chestnut St., St.
Louis, MO, 63103. (Minimum contribution: \$1, or \$2 if married filing
combined).

Additional Funds

If you choose to give to additional funds, enter the two-digit additional fund code in the spaces provided on Line 46. If you

want to give to more than two additional funds, please submit a contribution directly to the fund. For additional information visit http://dor.mo.gov/personal/trustfunds.php. Donations received from the following funds are designated specifically for Missouri residents.

American Cancer Society Heartland Division, Inc.,
Fund (01) – For more information anytime, call toll free
1-800-ACS-2345 or visit www.cancer.org. Donations
can be sent directly to the American Cancer Society at 1100
Pennsylvania Avenue, Kansas City, MO 64105. (Minimum irrevocable contribution: \$1, not to exceed \$200)

American Diabetes Association Gateway Area Fund (02) – Requests for information may be made by calling (314) 822-5490 or contacting Gateway Area Diabetes Association Fund, 15455 Conway Road, Suite 360, Chesterfield, MO 63017. (Minimum irrevocable contribution: \$1, not to exceed \$200)

American Heart Association Fund (03) - For more information, please contact: American Heart Association, 460 N. Lindbergh Blvd., St. Louis, MO 63141-7808, or call (314) 692-5600. (Minimum irrevocable contribution: \$1, not to exceed \$200)

ALS Lou Gehrig's Disease Fund (05) – Call 1-888-873-8539 for patient services in Eastern Missouri and 1-800-878-2062 for patient services in Western Missouri.

(Minimum irrevocable contribution: \$1, not to exceed \$200

Arthritis Foundation Fund (09) - Call (314)
991-9333 or visit www.arthritis.org. Contributions can be made at any time directly to the Arthritis Foundation, 9433 Olive Blvd., Suite 100, St. Louis, MO 63132. (Minimum irrevocable contribution: \$1, not to exceed \$200)

Foster Care and Adoptive Parents Recruitment and Retention Fund (14) – For more information please contact: Missouri Children's Division, P.O. Box 88, Jefferson City, MO 65103-0088 or call (573) 522-8024. (Minimum contribution: \$1, or \$2 if married filing combined)

March of Dimes Fund (08) – Send requests for information and contributions directly to the March of Dimes Fund, 11829 Dorsett Road, Maryland Heights, MO 63043. (Minimum irrevocable contribution: \$1, not to exceed \$200)

Missouri National Guard Foundation Fund (19) The foundation assists Missouri National Guard
Members and all veterans and their families by providing services
that enable them to improve their financial, physical, mental
and social well-being. The Foundation is a 501(c)(3) tax exempt,
charitable organization. For more information call (573) 632-4240,
or visit our website at www.mongf.org. Donations can be made
directly on the website, or mailed to Missouri National Guard
Foundation, 2302 Militia Drive, Jefferson City, Missouri 65101.
(Minimum contribution: \$1, or \$2 if married filing combined)

Muscular Dystrophy Association Fund (07) – Requests for information and contributions may be made at any time directly to: Muscular Dystrophy Association, 222 South Riverside Plaza, Suite 1500, Chicago, IL 60606; (312) 260-5900. (Minimum irrevocable contribution: \$1, not to exceed \$200)

National Multiple Sclerosis Society Fund (10)

- Visit www.nationalmssociety.org, call 1-800FIGHTMS, or contact National Multiple Sclerosis
Society Fund, 12125 Woodcrest Executive Drive, Suite 320, St. Louis, MO 63141 (Minimum irrevocable contribution: \$1, not to exceed \$200)

Pediatric Cancer Research Trust Fund (18) CureSearch for Children's Cancer raises funds
to support children's cancer research. For more
information, visit www.curesearch.org or call (800) 458-6223.
(Minimum contribution: \$1, or \$2 if married filing combined)

Funds Codes

American Cancer Society Heartland Division, Inc. Fund 01
American Diabetes Association Gateway Area Fund 02
American Heart Association Fund
Amyotrophic Lateral Sclerosis
(ALS - Lou Gehrig's Disease) Fund
Arthritis Foundation Fund
Foster Care and Adoptive Parents
Recruitment and Retention Fund
March of Dimes Fund
Missouri National Guard Foundation Fund
Muscular Dystrophy Association Fund 07
National Multiple Sclerosis Society Fund
Pediatric Cancer Research Trust Fund

LINE 47 - MISSOURI 529 EDUCATION SAVINGS PLAN DEPOSIT

You can deposit all or a portion of your refund into a Missouri 529 Education Savings Plan (MOST) account. To make this choice, there must be an open account and the total deposit must be a minimum of \$25. Please complete and attach Missouri's 529 Education Savings Plan Direct Deposit Form (Form 5632). For more information, see Form 5632 at http://dor.mo.gov/forms.

LINE 48 - REFUND

Subtract Lines 45, 46, and 47 from Line 44 and enter on Line 48. If your refund is \$100,000 or more, please consider filing electronically and receiving your refund by direct deposit to your bank account. For security purposes, all refunds over this amount must be electronically deposited. If you do not file electronically with direct deposit, the Department will contact you for your banking information, which may delay your refund.

Note: If you have any other liability due the state of Missouri, such as child support payments, or a debt with the Internal Revenue Service, your income tax refund may be applied to that liability in accordance with **Section 143.781, RSMo.** Your property tax credit may be applied to any property tax credit or individual income tax liability pursuant to **Section 143.782, RSMo.** You will be notified if your refund is offset against any debt(s).

LINE 50 - UNDERPAYMENT OF ESTIMATED TAX PENALTY

If the total payments and credits amount on Line 40 less Line 37 or Line 43 less Line 37 is less than 90 percent (66-2/3 percent for farmers) of the amount on Line 32, or if your estimated tax payments were not paid timely, you may owe a penalty. Complete the Underpayment of Estimated Tax by Individuals (Form MO-2210), see pages 39-42. If you owe a penalty, enter the penalty amount on Line 44

If you have an overpayment on Line 44, the Department of Revenue will reduce your overpayment by the amount of the penalty.

LINE 51 - AMOUNT DUE

Payments must be postmarked by **April 15, 2020**, to avoid interest and late payment charges. The Department of Revenue offers several payment options.

- Check or money order: Attach a check or money order (U.S. funds only), payable to Missouri Department of Revenue. By submitting payment by check, you authorize the Department of Revenue to process the check electronically upon receipt.
- Do not postdate. The Department of Revenue may electronically resubmit checks returned for insufficient or uncollected funds.

- If you mail your payment after your return is filed, attach your payment to the Form MO-1040V found on page 48.
- Electronic Bank Draft (E-Check): By entering your bank routing number and checking account number, you can pay online at http://dor.mo.gov or by calling (888) 929-0513.
 There will be a convenience fee to use this service.
- Credit Card: The Department accepts MasterCard, Discover,
 Visa, and American Express. To pay online visit our website at
 http://dor.mo.gov or call (888) 929-0513. The convenience
 fees listed below will be charged to your account for
 processing credit card payments:

Amount of Tax Paid	Convenience Fee
\$0.00 - \$50.00	\$1.25
\$50.01 - \$75.00	\$1.75
\$75.01 - \$100.00	\$2.15
\$100.01 and up	2.15%

Note: The convenience fees for credit card transactions are paid to the third party vendor, **not** to the Missouri Department of Revenue. By accessing this payment system, the user will be leaving Missouri's website and connecting to the website of the third party vendor, which is a secure and confidential website.

SIGN RETURN

You must sign Form MO-1040. Both spouses must sign a combined return. If you use a paid preparer, the preparer must also sign the return. If you wish to authorize the Director of Revenue to release information regarding your tax account to your preparer or any member of your preparer's firm, indicate by selecting the "yes" box below the signature line.

INFORMATION TO COMPLETE FORM MO-A, PART 1

Missouri Modifications to Federal Adjusted Gross Income

Form MO-A, Part 1, computes Missouri modifications to federal adjusted gross income. Modifications on Lines 1 through 6 include income that is exempt from federal tax, but taxable for state tax purposes. Modifications on Lines 8 through 17 exclude income that is exempt from state tax, but taxable for federal tax purposes. If after reviewing the instructions for Part 1, you have no modifications, enter on Form MO-1040, Lines 3 and 5, the same amount(s) entered on Form MO-1040, Line 1.

LINE 1 - INTEREST ON STATE AND LOCAL OBLIGATIONS

If you received income from an obligation of a state or political subdivision **other than Missouri**, enter the amount of that income, reduced by the related expenses incurred (management fees, trustee fees, interest, etc.) if the expenses are more than \$500.

LINE 2 - PARTNERSHIP, FIDUCIARY, S CORPORATION, OTHER

Enter positive adjustments (additions) reported from partnerships, fiduciaries, S corporations, or other sources. The partnership, fiduciary, or S corporation must notify you of the amount of any such adjustment (addition) to which you are entitled. Select the boxes applicable on Line 2 and attach a copy of the notification received.

Net Operating Loss (NOL) - Carryback/Carryforward

In the year of your Net Operating Loss (NOL), enter on Form MO-A, Part 1, Line 2 the amount of your eligible NOL to be carried back or carried forward from the loss year. Enter the sum of the current year's NOL (as a positive number), plus any unused NOL from prior years. If your federal adjusted gross income includes an NOL carryback that is also carried back or carried forward to another year, enter the unused amount as an addition. Please attach the calculation of your NOL carryback/carryforward, or your Federal Form 1045, Schedules A and B

Amended returns only: If your federal adjusted gross income includes an NOL (other than a farming loss) of more than two years, enter the loss amount as a positive number.

Non-medical Withdrawal from Individual Medical Account (IMA)

Any monies you withdraw from your Individual Medical Account (IMA) for non-medical purposes are taxable to Missouri. The interest earned on such monies is also taxable to Missouri. The amount subject to tax is reported on a statement provided by the administrator of the IMA.

Business Interest

Previously Subtracted Business Interest Expenses: Enter the amount of business interest expense included in your federal adjusted gross income, to the extent the amount was subtracted from federal adjusted gross income on the Form MO-A in a previous year.

Non-qualified Withdrawal from Family Development Account

Non-qualified Withdrawal from Family Development Account: The amount of annual deposits previously subtracted must be added to your federal adjusted gross income if the withdrawal from the account was not for a qualified use.

LINE 3 - NON-QUALIFIED DISTRIBUTION FROM A QUALIFIED 529 PLAN

Any distribution made by the Missouri Savings for Tuition Program (MOST), the 529 plan administered by the Missouri Education Deposit Program, or any other qualified 529 plan, not used for qualified education expenses, must be added to federal adjusted gross income of the taxpayer who made contributions to the plan. The amount of the distribution that must be added includes contributions previously exempt from state tax and earnings generated from the program (if the earnings are not already included in federal adjusted gross income). If the taxpayer who made the contribution is deceased, the beneficiary of the savings program must **add** the nonqualified taxable distribution to federal adjusted gross income on the Missouri income tax return.

LINE 4 - FOOD PANTRY CONTRIBUTIONS INCLUDED ON SCHEDULE A

If you are claiming the Food Pantry Tax Credit (Form MO-FPT) and you included your donations as an itemized deduction on your Federal Schedule A, enter the amount of your donations, as noted on Form MO-FPT.

LINE 5 - NONRESIDENT PROPERTY TAX

If you are a nonresident or part-year resident and you reported property taxes paid to another state or political subdivision on Line 5b and /or 5c of your Federal Schedule A, you must report an income modification on Line 5 of Form MO-A, unless that state or political subdivision allows a subtraction to income for Missouri property taxes. Visit http://dor.mo.gov/faq/personal/nonresident.php for a list of states that allow a subtraction for Missouri property taxes. If your state and local taxes from Federal Schedule A, Line 5d

exceeds \$10,000 (or \$5,000 for married filing separate filers), use the following calculation to determine your income modification that must be added to federal adjusted gross income.

Nonresident Property Tax
Total State and Local Tax

x \$5,000 or \$10,000

Income Modification

LINE 6 - NONQUALIFIED DISTRIBUTION FROM A QUALIFIED ACHIEVING A BETTER LIFE EXPERIENCE PROGRAM (ABLE)

Any distribution made by the ABLE program administered by the Missouri Achieving a Better Life Experience board, not used for qualified disability expenses or not held for the minimum length of time established by the board must be added to the federal adjusted gross income of the taxpayer who made the contributions to the plan. The amount of the distribution that must be added includes contributions previously exempt from state tax and earnings generated from the program (if the earnings are not already included in federal adjusted gross income). If the taxpayer who made the contribution is deceased, the beneficiary must **add** the nonqualified distribution to federal adjusted gross income on the Missouri income tax return.

LINE 7 - TOTAL ADDITIONS

Add Lines 1 through 6. Enter the totals on Form MO-A, Part 1, Line 7 and on Form MO-1040, Line 2.

LINE 8 - INTEREST ON EXEMPT FEDERAL OBLIGATIONS

Interest from direct obligations of the U.S. Government, such as U.S. savings bonds, U.S. treasury bills, bonds, and notes is exempt from state taxation under the laws of the United States. Attach a detailed list or all Federal Forms 1099. Taxpayers who claim exclusion for interest from direct U.S. obligations must identify the specific securities owned, e.g., "U.S. savings bond". A general description such as "interest on U.S. obligation" or "U.S. Government securities" is not acceptable. (See Missouri Regulation 12 CSR 10-2.150 for the taxability of various U.S. Government related obligations.) Failure to identify the specific security will result in the disallowance of the deduction.

A federally taxed distribution received from a mutual fund investing exclusively in direct U.S. Government obligations is exempt. If the mutual fund invests in both exempt (direct) and non-exempt (indirect) federal obligations, the deduction allowed will be the distribution received from the mutual fund attributable to the interest on the direct U.S. Government obligations, as determined by the mutual fund. Attach a copy of the year-end statement received from the mutual fund showing either the amount of money received or the percentage of funds received from direct U.S. Government obligations, or a summary statement received from the mutual fund which clearly identifies the exempt and non-exempt portions of the U.S. Government obligation interest. The statement does not need to list each obligation separately. Failure to attach the requested document will result in the disallowance of the deduction.

Reduce the amount claimed by related expenses, if expenses were over \$500. To arrive at the amount of related expenses, you may use actual expenses or a reasonable estimate. In general, you should use the same or similar method used to compute related expenses for federal income tax purposes, provided that the method reasonably reflects related expenses for Missouri-exempt income.

If you fail to compute reasonable related expenses, the Director of Revenue will make an adjustment based on the best information available. If sufficient information is not available or if your records do not provide sufficient information, the Director of Revenue will use the following formula to compute related expenses:

Exempt Income
Total Income

Х

Expense Items Reduction to Exempt Income

The principal expense item in this formula is interest expense; however, the Director of Revenue may include other expense items because of their direct relationship to the production of exempt income. You may propose an alternative method provided that it properly reflects the amount of related expenses.

LINE 9 - STATE INCOME TAX REFUND

Enter the amount of any state income tax refund included in your federal adjusted gross income on Form MO-1040, Line 1 (from Federal Form 1040 or Federal Form 1040-SR, Schedule, Part 1, Line 1). Attach a copy of Federal Form 1040 or 1040-SR (pages 1 and 2) and applicable schedules.

LINE 10 - PARTNERSHIP, FIDUCIARY, S CORPORATION, RAILROAD RETIREMENT BENEFITS, OTHER

Enter subtractions, reported from partnerships, fiduciaries, and S corporations. The partnership, fiduciary, and S corporation must notify you of the amount of any such subtraction to which you are entitled. Select the boxes applicable on Line 10 and attach a copy of the notification received. **Failure to attach a copy of the notification furnished to you will result in the disallowance of the subtraction.**

Railroad Retirement Benefits Administered by the Railroad Retirement Board, such as all Tier I and Tier II benefits and any railroad retirement sick pay, disability, and unemployment benefits, included in federal adjusted gross income (Form MO-1040, Line 1), are exempt from state taxation. Enter any such benefits received on Line 10. If you have other subtractions, indicate the source on Line 10. Other subtractions include:

- Military Income of Nonresident Military Personnel. Enter the
 amount of any military income received by nonresident
 military personnel stationed in Missouri. Nonresident active
 duty military service-members who are required to file a
 Missouri return may subtract the military income received
 from their federal adjusted gross income. Nonresident
 service-members' spouses who are in Missouri due to as
 their state of residence may subtract their income from their
 federal adjusted gross income. Attach a copy of the Form(s)
 W-2 reporting your military income.
- 2. Combat Pay Included in Federal Adjusted Gross Income Earned by Military Personnel with a Missouri Home of **Record.** The IRS allows enlisted members, warrant officers and commissioned warrant officers to exclude their military pay received while serving in a combat zone, or while hospitalized as a result of injuries incurred while serving in a combat zone. The exclusion of combat pay received by a commissioned officer, other than a commissioned warrant officer, is limited to the highest rate of enlisted pay. Subtract all military income received while serving in a combat zone, which is included in Federal Adjusted Gross Income (FAGI) and is not otherwise excluded. In most cases combat pay is not included in Box 1, Wages, of Form W-2 and therefore is not included in FAGI. However if Box 1 includes combat pay, the portion consisting of combat pay may be taken as a subtraction for Missouri purposes.

Example 1: A resident of Missouri, is an enlisted member of the military. He enters a combat zone in July and is there through December. He earns \$12,000 January through June, and earns \$20,000 July through December. Box 1 of his Form W-2 should only indicate the \$12,000 he received prior to entering the combat zone. He is not entitled to a subtraction, as his combat pay is not included in his FAGI.

Example 2: A resident of Missouri, is a high ranking commissioned officer. He enters a combat zone in July and is there through December. He earns \$50,000 January through June, and earns \$70,000 July through December. The IRS limits his Form W-2 to indicate \$80,000. He is entitled to a

- subtraction of \$30,000, which represents the portion of Box 1 of Form W-2 attributable to combat pay that is included in his FAGI
- 3. Build America Bonds and Recovery Zone Bonds Interest. Enter any interest received from Build America or Recovery Zone Bonds that is included in your federal adjusted gross income. Attach a copy of your Interest Income (Form 1099-INT) or any other applicable documentation.
- 4. Missouri Public-Private Transportation Act. Enter any income received in connection with the Missouri Public Private Transportation Act, that is included in your federal adjusted gross income.
- 5. Net Operating Loss (NOL). Any amount of Net Operating Loss deduction taken against federal taxable income but disallowed for Missouri income tax purposes after June 18, 2002, may be carried forward and taken against any income on the Missouri income tax return for a period of up to 20 years from the year of the initial loss. Attach a calculation of your Net Operating Loss carryback/carryforward or a copy of your Federal Form 1045, Schedules A and B.
- 6. Contributions into a Missouri Individual Medical Account (IMA). Contributions that were made by your employer into an Individual Medical Account (IMA) and used to pay your health care expenses are exempt from Missouri income tax. The interest income earned on the IMA account is also exempt from Missouri income tax. The IMA contribution is identified in Box 14 of your Form W-2, Wage and Tax Statement. Reduce the amount of contributions by the amount of medical and dental expenses deducted on Federal Form 1040 or 1040-SR, and included in Missouri itemized deductions.
- 7. Accumulation Distribution. If during the taxable year, you received a distribution as beneficiary of a trust that was made from accumulated earnings of prior years and you filed Tax on Accumulation Distribution of Trusts (Federal Form 4970), the amount of the distribution may be excluded from Missouri income to the extent that it was reported in your federal adjusted gross income.
- 8. Capital Gain Exclusion on Sale of Low Income Housing. If during the taxable year, you sold a federally subsidized (HUD) low income housing project to a nonprofit or governmental organization, and at least 40 percent of the units are occupied by persons or families having incomes of 60 percent or less of the median income, you may exclude 25 percent of the capital gain from Missouri tax. However, the buyer of the property must agree to preserve or increase the low income occupancy of the project. To use this exclusion, enter 25 percent of the capital gain reported on your Federal Form 1040 or 1040-SR. Attach a copy of your Federal Form 1040 or 1040-SR (pages 1 and 2) and Sales of Business Property (Federal Form 4797).
- 9. Family Development Account. A family development account holder may subtract the amount of annual deposits made to the account (not to exceed \$2,000). Approved withdrawals from the family development account are also exempt from state tax. Interest earned by a family development account is exempt from state taxation and may be subtracted from an account holder's federal adjusted gross income. Any money withdrawn for an unapproved use is subject to tax. Attach proper certification and a copy of your Form 1099.
- 10. Federally Taxable Missouri Exempt Obligations. Income from any bond issued by the Missouri Higher Education Loan Authority (MOHELA), including interest or proceeds resulting from the sale of the bond, is exempt from Missouri tax. Enter the amount of such income included in federal adjusted gross income on Line 10.
- **11. Condemnation of Property.** If you included in your Federal Adjusted Gross Income any gain arising from compulsory or involuntary conversion of property as a result of condemnation

or the imminence thereof, you may exclude that gain from Missouri tax. Attach a copy of your Federal Form 1040 or 1040-SR, Schedule D, and Form 4797.

- 12. Employee Stock Ownership Plan (ESOP) Capital Gain Deduction. Enter 50 percent of the net capital gain from the sale or exchange of employer securities of a Missouri corporation to a qualified Missouri employee stock ownership plan if, upon completion of the transaction, the qualified Missouri employee stock ownership plan owns at least 30 percent of all outstanding employer securities issued by the Missouri corporation. Attach Form(s) 1099 and Beneficiary's Share of Income, Deductions, Credits, etc. (Schedule K-1).
- 13. Federally Taxable Missouri Exempt Taxable Federal Reserve Bank Interest. Interest income received from deposits held at a Federal Reserve Bank, to the extent it is included in federal income, is exempt from Missouri income tax. Attach all Form(s) 1099. If the interest income was received as part of a mutual fund distribution investing in exempt and non-exempt interest, the deduction allowed will be the distribution attributable to the interest from the Federal Reserve Bank, as determined by the mutual fund. Attach a copy of the year-end statement received from the mutual fund showing either the amount of money received or the percentage of funds received from a Federal Reserve Bank, or a summary statement received from the mutual fund which clearly identifies the exempt and non-exempt portions of the Federal Reserve Bank interest.

FORM SSA-1099 - SOCIAL SECURITY BENEFIT STATEMENT

Box 1. Name		Box 2.	Beneficiary's Social Security Number
BETTY TAXPAYER		00	0-00-0000
Box 3. Benefits Paid in 2019	Box 4. Benefits Repaid to SS	A in 2019	Box 5. Net Benefits Repaid for 2019 (Box 3 minus box 4)
*\$8,400.00	NONE		\$8,400.00
DESCRIPTION OF AMO	OUNT IN BOX 3		DESCRIPTION OF AMOUNT IN BOX 4
Paid by check or direct deposit Medicare premiums deducted from you Total Additions Benefits for 2019	\$7,800 ur benefit \$600 \$8,400 \$8,40	0.00	NONE
		Box 6.	Voluntary Federal Income Tax Withheld
		BE7 550	Address PTY TAXPAYER 0 TAXES LANE KTOWN, MO 55555-5555
*Includes: \$12.00 Paid in 20	019 for 2018		Claim Number (Use this number if you need to contact SSA 00-0000

14. Disallowed Business Income Expenses. If your deduction for business interest expenses were limited under Sub section 163(j) of the Internal Revenue Code, enter the disallowed amount. Attach a copy of your federal Form 8990.

LINE 11 - EXEMPT CONTRIBUTIONS MADE TO A QUALIFIED 529 PLAN

The state of Missouri allows a subtraction from federal adjusted gross income for the amount of annual contributions made to

the Missouri Savings for Tuition Program (MOST), the 529 plan administered by the Missouri Education Deposit Program, or any other qualified 529 plan.

The maximum annual exempt contribution is \$8,000 for single individuals or \$16,000 for married couples filing a combined return. If you are a participant claiming a subtraction for a contribution made to the savings program, you must **attach your statement provided by the program manager**. The statement must be in the name of the plan participant (account owner) claiming the subtraction.

LINE 12 - QUALIFIED HEALTH INSURANCE PREMIUMS

Enter the amount you paid for health insurance premiums, not to exceed your federal taxable income. Do not include any pre-tax premiums paid, any premiums excluded from federal taxable income, or any long term care insurance premiums. Use the worksheet on page 33 to determine your allowable subtraction.

LINE 13 - DEPRECIATION ADJUSTMENT

If you purchased an asset between July 1, 2002 and June 30, 2003, and you elected to use the 30 percent depreciation on your federal return, you may be able to subtract a portion of the depreciation.

Enter the additional depreciation created by the Job Creation and Worker Assistance Act previously added back in prior years to the extent allowable by **Section 143.121, RSMo.** This amount is computed by figuring the allowable depreciation prior to the Job Creation and Worker Assistance Act less the depreciation taken on your federal return.

If you have previously taken an addition modification for a qualifying property, but have sold or disposed of the property during the taxable year, select the box on Line 13 and take a subtraction for the amount not previously recovered. Visit http://dor.mo.gov/pdf/depreciation_examples.pdf for more information and examples.

LINE 14 - HOME ENERGY AUDIT EXPENSES

Enter the amount you paid for the costs incurred for a home energy audit or the implementation of any energy efficiency recommendations, to the extent the amounts paid were not subtracted from federal taxable income. The amount of the subtraction is limited to \$1,000 for taxpayers filing a single return or \$2,000 for taxpayers filing a combined return. Please complete and attach the Home Energy Audit Expense (Form MO-HEA) found on page 32.

LINE 15 - EXEMPT CONTRIBUTION MADE TO A QUALIFIED ACHIEVING A BETTER LIFE EXPERI-ENCE PROGRAM (ABLE)

The State of Missouri allows a subtraction from federal adjusted gross income for the amount of annual contributions made to the Achieving a Better Life Experience Program (ABLE). This plan is administered by the Missouri Achieving a Better Life Experience Board. The maximum annual exempt contribution is \$8,000 for single individuals or \$16,000 for married couples filing a combined return. If you contributed to ABLE and are claiming the subtraction on your Missouri income tax return, please attach one of the following with your return:

- Bank statements reporting/verifying the contribution date and contribution amount,
- · Copies of canceled checks,
- Form 5498-QA, or
- Other supporting documentation verifying the name of the individual who contributed to the ABLE account, contribution dates, and contribution amounts.

The documentation verifying contributions must be in the name of the individual claiming the subtraction.

LINE 16 - AGRICULTURE DISASTER RELIEF

Enter the amount of payment received from a program that provides compensation to agricultural producers that have suffered a loss as a result of a disaster or emergency. This amount must be included in your Federal Adjusted Gross Income. Attach a copy of the Form 1099, as well as a Federal Schedule F and Federal Schedule K-1 if applicable, indicating the payment amount.

LINE 17 - BUSINESS INCOME DEDUCTION

The State of Missouri allows a subtraction from federal adjusted gross income in the amount of 10 percent for Missouri Source Business Deductions. Complete the worksheet below only if you have Missouri source income and are claiming a Business Income Deduction. Please provide the Federal Form 1040 or Federal Form 1040-SR and all applicable schedule(s) for verification.

Missouri-source net profit from	Yourself	Spouse
Form 1040, Schedule(s) C, Line 31 that is included in federal adjusted gross income. (Enter zero if negative.)	1Y	2S
2. Missouri-source net profit (loss) from Form 1040 Schedule E, Part II, Line 32, that is included in federal adjusted gross income.	2Y	2S
3. Business income (Combine Line 1 and Line 2; amount cannot be less than zero.)	3Y	3S
4. Business income deduction. Multiply 3 by 10%. Enter on Form MO-A, Part I, Line 17.	4Y	4S

LINE 18 - TOTAL SUBTRACTIONS

Add Lines 8 through 17. Enter the total on Form MO-A, Part 1, Line 18 and on Form MO-1040, Line 4.

Note: Do not include income earned in other states on Line 18. Complete Form MO-NRI or Form MO-CR. See Form MO-1040, Line 27 or Line 28.



For Calendar Year January 1 - December 31, 2019

Print in BLACK ir	nk only and	DO NOT	STAPLE.
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	Amended Return Composite Return (For use by S corporations or Partnerships)
	ng a fiscal year return enter the beginning and ending dates here. I Year Beginning (MM/DD/YY) Fiscal Year Ending (MM/DD/YY) Department Use Only 0 0 0
Filing Status	Single Claimed as a Married Filing Married Filing Head of Qualifying Dependent Combined Separately Household Widow(er)
	Age 62 through 64 Age 65 or Older Blind 100% Disabled Non-Obligated Spouse rself Spouse Yourself Spouse Yourself Spouse Yourself Spouse Spouse Yourself Spouse Yourself Spouse Spouse Yourself Spouse Spouse Spouse Yourself Spouse Spou
Name	Social Security Number in 2019 Spouse's Social Security Number in 2019 First Name M.I. Last Name Suffix Spouse's First Name M.I. Spouse's Last Name Suffix In Care Of Name (Attorney, Executor, Personal Representative, etc.)
Address	Present Address (Include Apartment Number or Rural Route) City, Town, or Post Office State ZIP Code County of Residence

You may contribute to any one or all of the trust funds on Line 46. See pages 10-11 of the instructions for more trust fund information.

























				Yourself (Y)	Spouse (S)		
	1.	Federal adjusted gross income from federal return (see worksheet on page 7 of the instructions)	1Y	. 00	18		00
		(see worksheet on page 7 of the instructions)) . [
	2.	Total additions (from Form MO-A, Part 1, Line 7)	2Y	. 00	2S].[00
e e	2	Total income - Add Lines 1 and 2	3Y	. 00	3S		00
Income	٥.	Total income - Add Lines 1 and 2	<u> </u>] [
=	4.	Total subtractions (from Form MO-A, Part 1, Line 18)	4Y	. 00	4S].[00
	E	Missouri adjusted gross income - Subtract Line 4 from Line 3	5Y	00	5S		00
	5.	Missouri adjusted gross income - Subtract Line 4 from Line 3	01			J.L	00
		Total Missouri adjusted gross income - Add columns 5Y and 55	3	6	. 00		
	7.	Income percentages - Divide columns 5Y and 5S by total on	7Y	%	78	0	%
		Line 6. (Must equal 100%)	7 1		[73]	,	,0
	8.	Pension, Social Security, Social Security Disability, and Military	exen	nption (from Form		lΓ	\neg
		MO-A, Part 3, Section E)			8	ı.L	00
	9.	Tax from federal return		9	00		
	٥.	Tax Holli lederal letalli					
	10.	Other tax from federal return.		10	00		
	11	Total tax from federal return. Do not enter federal income tax with	hold	11	00		
	11.	Total tax from lederal return. Do not enter lederal income tax with	ieia.		<u>70</u>]		
	12.	Federal tax percentage – Enter the percentage based on your					
		Missouri Adjusted Gross Income, Line 6. Use the chart below to		12	%		
		find your percentage		12			
		Missouri Adjusted Gross Income Range, Line 6: Federal Ta	x Per	centage:			
		\$25,000 or less					
2		\$25,001 to \$50,000					
ţi		\$50,001 to \$100,000					
Deductions		\$125,001 or more					
0							
S	13.	Federal income tax deduction – Multiply Line 11 by the percent	age o	n Line 12. Enter this	12		00
tion		amount not to exceed \$5,000 for an individual or \$10,000 for co	mbin	ea illers	[13]	J.L	00
Exemption	14.	Missouri standard deduction or itemized deductions.					
Ж		 Single or Married Filing Separate - \$12,200 					
		 Head of Household - \$18,350 Married Filing Combined or Qualifying Widow(er) - \$24,4 	100				
		If age 65 or older, blind, or claimed as a dependent, see page 6.	+00			1 [
		If itemizing, see Form MO-A, Part 2			14].[00
	4.5				15	1 [00
	15.	Long-term care insurance deduction] . L] _ [00
	16.	Health care sharing ministry deduction			16].[00
					4.7] [00
	17.	Military income deduction			17].[] [00
	18.	Bring jobs home deduction			18].[00
		•			10] [
	19.	Transportation facilities deduction			19	J.L	00
		A. Port Cargo Expansion B. International Trade Fa	cility	C. Qualified Trade Ad	ctivities		



					_	_		
per	20.	First Time Home Buyers deduction. A.	В.	20	. 00)		
ontine	21.	Total deductions - Add Lines 8 and 13 through 20		. 21	. 00)		
Deductions Continued	22.	Subtotal - Subtract Line 21 from Line 6		. 22	. 00)		
duct	23.	. 1. 7	23Y . 00	238	. 00			
Dec	24	Lines 7Y and 7S	231		. [00	リ コ		
		modification	24Y . 00	248	. 00)		
	25	Taxable income - Subtract Line 24 from Line 23	25Y . 00	25\$. 00)		
						7		
	26.	Tax (see tax chart on page 22 of the instructions)	26Y . 00	268	. 00	1		
	27.	Resident credit - Attach Form MO-CR and other states'	27Y 00	278	00			
		income tax return(s)	27Y	[273]	.[00	Ц		
	28.	Missouri income percentage - Enter 100% unless you are completing Form MO-NRI. Attach Form MO-NRI and a						
		copy of your federal return if less than 100%	28Y %	28S	%			
Тах	29.	Balance - Subtract Line 27 from Line 26; OR] [٦		
		multiply Line 26 by percentage on Line 28	29Y . 00	298	. 00)		
	30.	Other taxes - Select box and attach federal form indicated.						
		Lump sum distribution (Form 4972)						
		Recapture of low income housing credit (Form 8611)	30Y . 00	308	. 00)		
	31.	Subtotal - Add Lines 29 and 30	31Y . 00	31S	. 00)		
				32	00			
	32.	Total Tax - Add Lines 31Y and 31S		. [02]	.[00	П		
						٦		
	33.	MISSOURI tax withheld - Attach Forms W-2 and 1099		. 33	. 00)		
				0.4]		
ts	34.	2019 Missouri estimated tax payments - Include overpayment from 2018 applied to 2019						
Credi	35.	Missouri tax payments for nonresident partners or S corporation shareholders - Attach Forms MO-2NR and MO-NRP						
and				36	. 00	7		
Payments and Credits	36.	Missouri tax payments for nonresident entertainers - Attach Fo	orm MU-2ENT			7		
Payı	37.	Amount paid with Missouri extension of time to file (Form MO-	<u>60</u>)	. 37	. 00	1		
	38.	Miscellaneous tax credits (from Form MO-TC, Line 13) - Attacl	h Form MO-TC	. 38	. 00)		
	39.	Property tax credit - Attach Form MO-PTS		. 39	. 00)		
	40	Total payments and credits - Add Lines 33 through 30		40	00)		



	Sk	ip Lines 41 through 43 if you are not filing an amended return.
	41.	Amount paid on original return.
	42.	Overpayment as shown (or adjusted) on original return
		Indicate Reason for Amending
_		Enter date of IRS report (MM/DD/YY)
Amended Return		A. Federal audit.
ded		Enter year of loss (YY)
Amer		B. Net Operating Loss carryback
,		Enter year of credit (YY)
		C. Investment tax credit carryback Enter date of federal amended return, if filed. (MM/DD/YY)
		D. Correction other than A, B, or C
	43.	Amended return total payments and credits - Add Line 41 to Line 40 or subtract Line 42 from Line 40.
	44.	If Line 40, or if amended return, Line 43, is larger than Line 32, enter the difference.
		Amount of OVERPAYMENT
	45.	Amount of Line 44 to be applied to your 2020 estimated tax
	46.	Enter the amount of your donation in the trust fund boxes below. See instructions for additional trust fund codes.
		Children's
	46	a. Trust Fund L. 00 46b. Trust Fund L. 00 46c. Trust Fund L. 00 46d. Trust Fund L. 00 46
	46	Workers' 9. Memorial Fund
		Kansas City Soldiers Regional Law Memorial
Refund	46i	Organ Donor Enforcement Nilliary Museum in
Be	46	Additional Fund Fund Amount Additional Fund Amount Additional Fund Amount Fund Fund Amount Fund Fund Fund Fund Fund Fund Fund Fund
		Total Donation - Add amounts from Boxes 46a through 46m and enter here
	47.	Amount of Line 44 to be deposited into a Missouri 529 Education Savings Plan (MOST) account. Enter amount from Line E of Form 5632
	48.	REFUND - Subtract Lines 45, 46, and 47 from Line 44 and enter here

Reserved



	49. If Line 32 is larger than Line 40 or Line 43, enter the difference. Amount of UNDERPAYMENT (see the instructions for Line 49)	49
Amount Due	50. Underpayment of estimated tax penalty - Attach Form MO-2210. Enter penalty amount he Select this box if you are a farmer exempt from the underpayment of estimated tax	
	51. AMOUNT DUE - Add Lines 49 and 50. If you pay by check, you authorize the Department of Revenue to process the check electronically. Any returned check may be presented again electronically	51
	Under penalties of perjury, I declare that I have examined this return, including accompanying school of my knowledge and belief it is true, correct, and complete. By signing or entering my name in the "the Department of Revenue with my signature as required under Section 143.561, RSMo. Declarate based on all information of which he or she has knowledge. As provided in Chapter 143, RS imposed on any individual who files a frivolous return. I also declare under penalties of unauthorized aliens as defined under federal law and that I am not eligible for any tax exemption aliens.	Signature" field(s) below, I am providing tion of preparer (other than taxpayer) is SMo , a penalty of up to \$500 shall be f perjury that I employ no illegal or
	Signature	Date (MM/DD/YY)
	Spouse's Signature (If filing combined, BOTH must sign)	Date (MM/DD/YY)
ē		
Signature	E-mail Address	Daytime Telephone
Siç		
	Preparer's Signature	Date (MM/DD/YY)
	Preparer's FEIN, SSN, or PTIN	Preparer's Telephone
	Preparer's Address	State ZIP Code
	I authorize the Director of Revenue or delegate to discuss my return and attachments with the or any member of the preparer's firm	e preparer Yes No
	Department Use Only	
	A	
		(Revised 12-2019)

Mail To: Balance Due:

Missouri Department of Revenue P.O. Box 329 Jefferson City, MO 65105-0329

Refund or No Amount Due: Missouri Department of Revenue P.O. Box 500 Jefferson City, MO 65105-0500

Phone (Balance Due): (573) 751-7200 Phone (Refund or No Amount Due): (573) 751-3505

Fax: (573) 522-1762

E-mail: income@dor.mo.gov



2019 Tax Chart

To identify your tax, use your Missouri taxable income from Form MO-1040, Line 25Y and 25S and the tax chart in Section A below. A separate tax must be computed for you and your spouse.

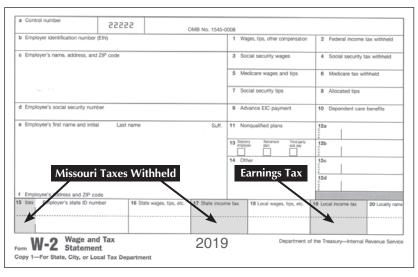
Calculate your Missouri tax using the online tax calculator at http://dor.mo.gov/personal/individual or by using the worksheet in Section B below. Round to the nearest whole dollar and enter on Form MO-1040, Line 26Y and 26S.

	Tax Rate Cha	rt
	If the Missouri taxable income is:	The tax is:
	\$0 to \$104	\$0
1	At least \$105 but not over \$1,053	1.5% of the Missouri taxable income
7	Over \$1,053 but not over \$2,106	
9	Over \$2,106 but not over \$3,159	\$37 plus 2.5% of excess over \$2,106
±	Over \$3,159 but not over \$4,212	\$63 plus 3% of excess over \$3,159
ecti	Over \$4,212 but not over \$5,265	\$95 plus 3.5% of excess over \$4,212
S	Over \$5,265 but not over \$6,318	\$132 plus 4% of excess over \$5,265
	Over \$6,318 but not over \$7,371	\$174 plus 4.5% of excess over \$6,318
	Over \$7,371 but not over \$8,424	\$221 plus 5% of excess over \$7,371
	Over \$8,424	\$274 plus 5.4% of excess over \$8,424

	Tax Calculat	ion Works	heet			
		Yourself	Spouse		Example A	Example B
	1. Missouri taxable income (Form MO-1040, Lines 25Y and 25S)			_	\$ 3,090	\$ 12,000
8	2. Enter the minimum taxable income for your tax bracket (see Section A above). If below \$1,053 enter \$0		_	<u>-</u>	\$2,106	\$8,424
ection	3. Difference - Subtract Line 2 from Line 1 = \$		_	_ =	\$ 984	\$ 3,576
Sec	4. Enter the percent for your tax bracket (see Section A above)		_%	_% X	2.5%	5.4%
	5. Multiply Line 3 by the percent on Line 4 = \$			_ =	\$ 24.60	\$ 193.10
	6. Enter the tax from your tax bracket - before applying the percent (see Section A above) + \$		_	+	\$37	\$
	7. Total Missouri Tax - Add Line 5 and 6. Enter here and on Form MO-1040, Lines 26Y and 26S = \$		_	_ =	\$ 62	\$ 467
					(\$61.60 rounded to the	(\$467.10 rounded to the

nearest dollar)

nearest dollar)





Department Use Only			
(MM/DD/YY)			

Attach to Form MO-1040. Attach your federal return. See information beginning on page 12 to assist you in completing this form.

12. Qualified Health Insurance Premiums - Attach the Qualified Health Insurance Premiums Worksheet (Form 5695) and supporting		Soc	sial Security Number	Spouse's Social Security Number	
Additions Spouse's First Name					
Additions No. Spouse's Last Name Suffix	me	Firs	it Name M.I. Last Name		Suffix
Additions 1. Interest on state and local obligations other than Missouri source	Nai				
1. Interest on state and local obligations other than Missouri source 1Y		Spc	puse's First Name M.I. Spouse's Last Nar	me	Suffix
1. Interest on state and local obligations other than Missouri source 1Y					
1. Interest on state and local obligations other than Missouri source 1Y					
1. Interest on state and local obligations other than Missouri source		Ad	ditions	Yourself (Y) Spouse (S')
Net Operating Loss (Carryback/Carryforward) 2Y .00 2S .00 .0					
Net Operating Loss (Carryback/Carryforward) Other (description) 3 Nonqualified distribution received from a qualified 529 plan		1.	Interest on state and local obligations other than Missouri source	11 . 00 15	. [00]
Other (description)		2.	Partnership Fiduciary S Corporation	Business Interest	
3. Nonqualified distribution received from a qualified 529 plan			Net Operating Loss (Carryback/Carryforward)		
Combat Pay Build America and Recovery Zone Bond Interest MO Public-Private Transportation Act Net Operating Loss Federal Reserves Bank Interest Other (description) 10Y 10S .00 11. Exempt contributions made to a qualified 529 plan (education savings program) 11. Qualified Health Insurance Premiums - Attach the Qualified Health Insurance Premiums Worksheet (Form 5695) and supporting	ē		Other (description)	2Y . 00 2S	. 00
Combat Pay Build America and Recovery Zone Bond Interest MO Public-Private Transportation Act Net Operating Loss Federal Reserves Bank Interest Other (description) 10Y 10S .00 11. Exempt contributions made to a qualified 529 plan (education savings program) 11. Qualified Health Insurance Premiums - Attach the Qualified Health Insurance Premiums Worksheet (Form 5695) and supporting	COM	3.		20 20 20	
Combat Pay Build America and Recovery Zone Bond Interest MO Public-Private Transportation Act Net Operating Loss Federal Reserves Bank Interest Other (description) 10Y 10S .00 11. Exempt contributions made to a qualified 529 plan (education savings program) 11. Qualified Health Insurance Premiums - Attach the Qualified Health Insurance Premiums Worksheet (Form 5695) and supporting	ss In		(education savings program) not used for qualified expenses	[31] [00] [35]	[00]
Combat Pay Build America and Recovery Zone Bond Interest MO Public-Private Transportation Act Net Operating Loss Federal Reserves Bank Interest Other (description) 10Y 10S .00 11. Exempt contributions made to a qualified 529 plan (education savings program) 11. Qualified Health Insurance Premiums - Attach the Qualified Health Insurance Premiums Worksheet (Form 5695) and supporting	d Gros	4.	Food Pantry contributions included on Federal Schedule A	4Y . 00 4S	. 00
Combat Pay Build America and Recovery Zone Bond Interest MO Public-Private Transportation Act Net Operating Loss Federal Reserves Bank Interest Other (description) 10Y 10S .00 11. Exempt contributions made to a qualified 529 plan (education savings program) 11. Qualified Health Insurance Premiums - Attach the Qualified Health Insurance Premiums Worksheet (Form 5695) and supporting	ıstec	5	Nonresident Property Tax	5Y 00 5S	00
Combat Pay Build America and Recovery Zone Bond Interest MO Public-Private Transportation Act Net Operating Loss Federal Reserves Bank Interest Other (description) 10Y 10S .00 11. Exempt contributions made to a qualified 529 plan (education savings program) 11. Qualified Health Insurance Premiums - Attach the Qualified Health Insurance Premiums Worksheet (Form 5695) and supporting	Adju				
Combat Pay Build America and Recovery Zone Bond Interest MO Public-Private Transportation Act Net Operating Loss Federal Reserves Bank Interest Other (description) 10Y 10S .00 11. Exempt contributions made to a qualified 529 plan (education savings program) 11. Qualified Health Insurance Premiums - Attach the Qualified Health Insurance Premiums Worksheet (Form 5695) and supporting	eral			6Y . 00 6S	. 00
Combat Pay Build America and Recovery Zone Bond Interest MO Public-Private Transportation Act Net Operating Loss Federal Reserves Bank Interest Other (description) 10Y 10S .00 11. Exempt contributions made to a qualified 529 plan (education savings program) 11. Qualified Health Insurance Premiums - Attach the Qualified Health Insurance Premiums Worksheet (Form 5695) and supporting	Fed	7.	_	7Y 00 7S	00
Combat Pay Build America and Recovery Zone Bond Interest MO Public-Private Transportation Act Net Operating Loss Federal Reserves Bank Interest Other (description) 10Y 10S .00 11. Exempt contributions made to a qualified 529 plan (education savings program) 11. Qualified Health Insurance Premiums - Attach the Qualified Health Insurance Premiums Worksheet (Form 5695) and supporting	s to				
Combat Pay Build America and Recovery Zone Bond Interest MO Public-Private Transportation Act Net Operating Loss Federal Reserves Bank Interest Other (description) 10Y 10S .00 11. Exempt contributions made to a qualified 529 plan (education savings program) 11. Qualified Health Insurance Premiums - Attach the Qualified Health Insurance Premiums Worksheet (Form 5695) and supporting	ation	Su			
Combat Pay Build America and Recovery Zone Bond Interest MO Public-Private Transportation Act Net Operating Loss Federal Reserves Bank Interest Other (description) 10Y 10S .00 11. Exempt contributions made to a qualified 529 plan (education savings program) 11. Qualified Health Insurance Premiums - Attach the Qualified Health Insurance Premiums Worksheet (Form 5695) and supporting	diffica	8.		8Y 00 8S	00
Combat Pay Build America and Recovery Zone Bond Interest MO Public-Private Transportation Act Net Operating Loss Federal Reserves Bank Interest Other (description) 10Y 10S .00 11. Exempt contributions made to a qualified 529 plan (education savings program) 11. Qualified Health Insurance Premiums - Attach the Qualified Health Insurance Premiums Worksheet (Form 5695) and supporting	Moc		gross income - Attach a detailed list of all Lederal Form(s) 1099		
Combat Pay Build America and Recovery Zone Bond Interest MO Public-Private Transportation Act Net Operating Loss Federal Reserves Bank Interest Other (description) 10Y 10S .00 11. Exempt contributions made to a qualified 529 plan (education savings program) 11. Qualified Health Insurance Premiums - Attach the Qualified Health Insurance Premiums Worksheet (Form 5695) and supporting	ouri	9.	Any state income tax refund included in federal adjusted gross income.	9Y . 00 9S	. 00
Net Operating Loss Federal Reserves Bank Interest Other (description) 10Y 10S 10S 10S 11S 12. Qualified Health Insurance Premiums - Attach the Qualified Health Insurance Premiums Worksheet (Form 5695) and supporting	- Miss	10.	Partnership Fiduciary S Corporation	Railroad Retirement Benefits Military (not	nresident)
Other (description) 11. Exempt contributions made to a qualified 529 plan (education savings program) 12. Qualified Health Insurance Premiums - Attach the Qualified Health Insurance Premiums Worksheet (Form 5695) and supporting	Part 1		Combat Pay Build America and Recovery Zone Bond	Interest MO Public-Private Transportation Act	
11. Exempt contributions made to a qualified 529 plan (education savings program)			Net Operating Loss Federal Reserves Bank Interest	Business Interest	
11. Exempt contributions made to a qualified 529 plan (education savings program)			Other (description)	10Y 00 10S	00
12. Qualified Health Insurance Premiums - Attach the Qualified Health Insurance Premiums Worksheet (Form 5695) and supporting		11.			
Insurance Premiums Worksheet (Form 5695) and supporting				11Y . 00 11S	. 00
127		12.			
			, , , , , , ,	12Y . 00 12S	. 00



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	13.	Missouri depreciation adjustment (Section 143.121, RSMo)				
pen		Sold or disposed property previously taken as addition modification	13Y	00	138	. 00
	14.	Home Energy Audit Expenses - Attach the Home Energy Audit Expense (Form MO-HEA)	14Y	00	148	. 00
Continued	15.	Exempt contributions made to a qualified Achieving a Better Life Experience Program (ABLE)	15Y	00	15S	. 00
Part 1	16.	Agriculture Disaster Relief	16Y	00	16S	. 00
_			17Y	00	178	. 00
	17. 18.	Business Income Deduction – see worksheet on page 16 Total Subtractions - Add Lines 8 through 17. Enter here and on	18Y		18S	
		Form MO-1040, Line 4	[181]	00	185	. 00
	Coi	mplete this section only if you itemize deductions on your federal return. A	ttach your Federal Form 1040	(pages	1 and 2) and Federal Sched	dule A.
	1.	Total federal itemized deductions from Federal Form 1040 or Federal F	Form 1040-SR, Line 9		1	
	2.	2019 Social security tax - (Yourself)			2	
suc	3.	2019 Social security tax - (Spouse)			3	00
ductio	4.	2019 Railroad retirement tax - Tier I and Tier II (Yourself)	4	. 00		
zed De	5.	2019 Railroad retirement tax - Tier I and Tier II (Spouse)	5	. 00		
i Itemi	6.	2019 Medicare tax - Yourself and Spouse (see instructions on page 43	6	. 00		
issour	7.	2019 Self-employment tax (see instructions on page 43)	7	. 00		
Part 2 - Missouri Itemized Deductions	8. 9.	Total - Add Lines 1 through 7		00	8	. 00
	10.	Earnings taxes included in Line 9	10	00		
	11.	Net state income taxes - Subtract Line 10 from Line 9 or enter Line 7 fr	om worksheet below		11	. 00
	12.	Missouri Itemized Deductions - Subtract Line 11 from Line 8. Enter her	e and on Form MO-1040, Line	14	12	. 00
ne 11		emplete this worksheet only if your total state and local taxe ederal Schedule A, Line 5d) exceeds \$10,000 (or \$5,000 for n			ized deductions	
Part 2 Worksheet - Net State Income Taxes, Line 11	1.	Enter the sum of your state and local taxes on Federal Form 1040 Schedule A, Line 5d			1	. 00
come	2.	State and local income taxes from Federal Form 1040 or Federal F	Form 1040-SR, Schedule A,	_ine 5a	a. 2	00
state Ir	3.	Earnings taxes included on Federal Form 1040 or Federal Form	n 1040-SR, Schedule A, Lir	ne 5a	3	. 00
- Net	4.	Subtract Line 3 from Line 2			4	
ksheet	5.	Divide Line 4 by Line 1			5	%
2 Worl	6.	Enter \$10,000 (\$5,000 if married filing separately)			6	. 00
Part	7.	Multiply Line 6 by percentage on Line 5. Enter here and on Miss	souri Itemized Deductions,			



Line 11, above.....

. 00

7

Part 3 - Pension and Social Security/Social Security Disability/Military Exemption

	Pu	blic Pension Calculation - Pensions received from any federal, state, or local government.	
	1.	Missouri adjusted gross income from Form MO-1040, Line 6	00
	2.	Taxable social security benefits from Federal Form 1040 or Federal Form 1040-SR, Line 5b	00
	3.	Subtract Line 2 from Line 1	00
	4.	Select the appropriate filing status and enter amount on Line 4. • Married Filing Combined (joint federal) - \$100,000	
		• Single, Head of Household, Married Filing Separate, and Qualifying Widow(er) - \$85,000	00
٧٠	5.	Subtract Line 4 from Line 3 and enter on Line 5. If Line 4 is greater than Line 3, enter \$0	00
Section A	6.	Taxable pension for each spouse from public sources from Federal Form 1040 or Federal Form 1040-SR, Line 4d	00
	7.	Amount from Line 6 or \$38,437 (maximum social security benefit), whichever is less	00
	8.	If you received taxable social security, complete Form MO-A, Lines 1 through 8 of Section C, and enter the amount(s) from Line(s) 6Y and 6S. See instructions if Line 3 of Section C is more than \$0	00
		and 63. See instructions if Line 3 of Section C is more than \$0	
	9.	Subtract Line 8 from Line 7. If Line 8 is greater than Line 7, enter \$0.	00
	10.	Add amounts on Lines 9Y and 9S	00
	11.	Total public pension, subtract Line 5 from Line 10. If Line 5 is greater than Line 10, enter \$0	00
	Pr	vate Pension Calculation - Annuities, pensions, IRAs, and 401(k) plans funded by a private source.	
	1.	Missouri adjusted gross income from Form MO-1040, Line 6	00
	2.	Taxable social security benefits from Federal Form 1040 or Federal Form 1040-SR, Line 5b	00
	3.	Subtract Line 2 from Line 1	00
B	4.	Select the appropriate filing status and enter the amount on Line 4. • Married Filing Combined (joint federal) - \$32,000 • Single, Head of Household, and Qualifying Widow(er) - \$25,000	
Section		Married Filing Separate - \$16,000.	00
0,	5.	Subtract Line 4 from Line 3. If Line 4 is greater than Line 3, enter \$0	00
	6.	Taxable pension for each spouse from private sources from Federal Form 1040 or Federal Form 1040-SR, Line 4b and 4d	00
	7.	Amounts from Line 6Y and 6S or \$6,000, whichever is less	00
	8.	Add Lines 7Y and 7S	00
	a	Total private pension, subtract Line 5 from Line 8. If Line 5 is greater than Line 8, enter \$0	00



		ocial Security or Social Security Disability Calculation - To cember 31 and have selected the 62 and older box on page 1 of Form MO						
	1.	Missouri adjusted gross income from Form MO-1040, Line 6				1		. 00
	 2. Select the appropriate filing status and enter the amount on Line 2. Married Filing Combined (joint federal) - \$100,000 Single, Head of Household, Married Filing Separate, and Qualifying Widow(er) - \$85,000							
n C	3.	Subtract Line 2 from Line 1 and enter on Line 3. If Line 2 is greater than	n Line	1, enter \$0		3		. 00
Section C	4.	Taxable social security benefits for each spouse from Federal Form1040 or Federal Form 1040-SR, Line 5b	4Y		00	4S		. 00
	5.	Taxable social security disability benefits for each spouse from Federal Form 1040 or 1040-SR, Line 5b	5Y		00	58		. 00
	6.	Amount from Line(s) 4Y or 5Y, and 4S or 5S	6Y		00	6S		. 00
	7.	Add Lines 6Y and 6S				7		. 00
	8.	Total social security/social security disability, subtract Line 3 from Line 3 enter \$0		•	7, 	8		. 00
	Mi	ilitary Pension Calculation						
	1.	Military retirement benefits included on Federal Form 1040 or Federal F	orm 1	040-SR, Line 4d		1		. 00
Section D	Taxable public pension from Federal Form 1040 or Federal Form 1040-SR, Line 4d							
Sect	3.	Divide Line 1 by Line 2 (Round to whole number)				3		%
	4.	Multiply Line 3 by Line 11 of Section A				4		. 00
	5.	Total military pension, subtract Line 4 from Line 1				5		. 00
n E	To	otal Pension and Social Security/Social Security Disabi	ility/N	Military Exemption				
Section E		ld Line 11 (Section A), Line 9 (Section B), Line 8 (Section C), and Line 5 (ster total amount here and on Form MO-1040, Line 8.						. 00

Attach to Form MO-1040. Attach your federal return. See information beginning on page 12 to assist you in completing this form.





Complete this form if you or your spouse have income from another state or political subdivision. If you had multiple credits, complete a separate form for each state or political subdivision.

Attach Form MO-CR and all income tax returns for each state or political subdivision to Form MO-1040.

Nam	е		Social Security Number	r		
			_	_		
Spor	ise's Name		Spouse's Social Secur	ity Number		
			-	_	1	
			Yourself (Y)		Spouse (S)	
1.	Claimant's total adjusted gross income (Form MO-1040, Line 5Y and Line 5S)	1Y		00 18		. 00
2.	Claimant's Missouri income tax (Form MO-1040, Line 26Y and 26S). Use the two letter abbreviation for the state or name of	2Y		00 28		. 00
	political subdivision. See the table on back for the two letter abbreviation, or enter the name of the political subdivision below.		State of:		State of:	
3.	Wages and commissions	зү		00 38		. 00
4.	Other income (Describe nature)	4Y		00 4S		. 00
5.	Total - Add Lines 3 and 4	5Y		00 5S		. 00
6.	Less, related adjustments (Federal Form 1040 or 1040-SR, Line 8a)	6Y		00 6S		. 00
7.	Net amounts - Subtract Line 6 from Line 5	7Y		00 7S		. 00
8.	Percentage of your income taxed - Divide Line 7 by Line 1	8Y	C	% 8S		%
9.	Maximum credit - Multiply Line 2 by percentage on Line 8	9Y		00 98		. 00
10.	Income tax you paid to another state or political subdivision. This is not income tax withheld. The income tax is reduced by all credits, except withholding and estimated tax	10Y		00 108		. 00
11.	Credit - Enter the smaller amount of Line 9 or Line 10 here and on Form MO-1040, Line 27Y or Line 27S. If you have multiple credits, add the amounts on Line 11 from each Form MO-CR before entering on Form MO-1040	11Y		00 118		. 00

Complete this form if you are a Missouri resident, resident estate, or resident trust with income from another state(s). A part-year resident may elect to use this form to determine his or her tax as if he or she were a resident for the entire taxable year. If you pay tax to more than one state, you must complete a separate Form MO-CR for each state. Before you begin:

- Complete your Missouri return, Form MO-1040 (Lines 1 through 26).
- Complete the other state's return(s) to determine the amount of income tax you paid to the other state(s).
- Line 1 Enter the amount from Form MO-1040, Line 5Y and 5S.
- Line 2 Enter the amount from Form MO-1040, Line 26Y and 26S.
- Lines 3 and 4 Enter the total amount of wages, commissions, and other income you or your spouse received from the other state(s), as reported on the other state(s) return.
- Line 5 Add Lines 3 and 4; enter the total on Line 5.
- Line 6 Enter any federal adjustments from:
 - Federal Form 1040 or 1040-SR, Line 8a
 - Line 7 Subtract Line 6 from Line 5. Enter the difference on Line 7.
 - Line 8 Divide Line 7 by Line 1. If greater than 100 percent, enter 100 percent. Round in whole percent, such as 91 percent instead of 90.5 percent. If percentage is less than 0.5 percent, use exact percentage. Enter percentage on Line 8.
 - Line 9 Multiply Line 2 by percentage on Line 8. Enter amount on Line 9.
 - Line 10 Enter your income tax liability as reported on the other state(s) income tax return. **This is not income tax withheld**. The income tax entered must be reduced by all credits, except withholding and estimated tax. If both you and your spouse paid income tax to the other state(s), each must claim his or her own portion of the tax liability.
 - Line 11 Enter the smaller amount from Form MO-CR, Line 9 or Line 10. This is your Missouri resident credit. Enter the amount on Form MO-1040, Line 27Y and 27S. (If you have multiple credits, add the amounts on Line 11 from each MO-CR). Your total credit cannot exceed the tax paid or the percent of tax due to Missouri on that part of your income.

Two Letter Abbreviations for States

AL - Alabama	GA - Georgia	MD - Maryland	NM - New Mexico	SD - South Dakota
AK - Alaska	HI - Hawaii	MA - Massachusetts	NY - New York	TN - Tennessee
AZ - Arizona	ID - Idaho	MI - Michigan	NC - North Carolina	TX - Texas
AR - Arkansas	IL - Illinois	MN - Minnesota	ND - North Dakota	UT - Utah
CA - California	IN - Indiana	MS - Mississippi	OH - Ohio	VT - Vermont
CO - Colorado	IA - Iowa	MT - Montana	OK - Oklahoma	VA - Virginia
CT - Connecticut	KS - Kansas	NE - Nebraska	OR - Oregon	WA - Washington
DC - District of Columbia	KY - Kentucky	NV - Nevada	PA - Pennsylvania	WV - West Virginia
DE - Delaware	LA - Louisiana	NH - New Hampshire	RI - Rhode Island	WI - Wisconsin
FL - Florida	ME - Maine	NJ - New Jersey	SC - South Carolina	WY - Wyoming



Social Security Number	Spouse's Social Security Number
Name	Spouse's Name
Address	Address
City, State, ZIP Code	City, State, ZIP Code
1. Nonresident of Missouri	1. Nonresident of Missouri
State of residence during 2019	State of residence during 2019
2. Part-Year Missouri Resident	2. Part-Year Missouri Resident
Indicate the dates you were a Missouri Resident in 2019.	Indicate the dates you were a Missouri Resident in 2019.
A. Date From: Date To:	A. Date From: Date To:
B. Indicate the other state of residence	B. Indicate the other state of residence
and dates you resided there	and dates you resided there
Date From: Date To:	Date From: Date To:
because your spouse is there on military orders, and Missouri is you	he spouse of a military servicemember residing outside of Missouri solel our state of residence, any income you earn is taxable to Missouri. Do no
complete Form MO-NRI. You must report 100% on Line 28 of Form M	O-1040.
3. Military/Nonresident Tax Status - Indicate your tax status	3. Military/Nonresident Tax Status - Indicate your tax status
below and complete Part C - Missouri Income Percentage.	below and complete Part C - Missouri Income Percentage.
Missouri Home of Record	Missouri Home of Record
I did not at any time during the 2019 tax year maintain a	I did not at any time during the 2019 tax year maintain a
permanent place of abode in Missouri, nor did I spend more	permanent place of abode in Missouri, nor did I spend more
than 30 days in Missouri during the year. I did maintain a	than 30 days in Missouri during the year. I did maintain a
permanent place of abode in the state of	permanent place of abode in the state of
Non-Missouri Home of Record	Non-Missouri Home of Record
Non-Missouri Home of Record I resided in Missouri during 2019 solely because my spouse	
I resided in Missouri during 2019 solely because my spouse or I was stationed at	I resided in Missouri during 2019 solely because my spouse or I was stationed at
I resided in Missouri during 2019 solely because my spouse	I resided in Missouri during 2019 solely because my spouse

,	Wor	ksheet for Missouri Source Income						
			Federal Form		Yourself or	9	Spouse (On A	
		Adjusted Gross	1040 or Federal Form 1040-SR		One Income Filer	Co	mbined Return	1)
		Income Computations	Line No.		Missouri Sources	Mi	issouri Sources	
		moonie comparations			Wildow Courses			•
	A.	Wages, salaries, tips, etc.	1	Α	. 00	Α		00
	В.	Taxable interest income.	2b	В	. 00	В		00
	C.	Dividend income	3b	С	. 00	С		00
	D.	State and local income tax refunds (from schedule 1, part 1)	1	D	. 00	D		00
	E.	Alimony received (from schedule 1, part 1)	2a	Е	. 00	Е		00
	F.	Business income or (loss) (from schedule 1, part 1)	3	F	. 00	F		00
	G.	Capital gain or (loss)	6	G	. 00	G		00
	Н.	Other gains or (losses) (from schedule 1, part 1)	4	Н	. 00	Н		00
		Taxable IRA distributions	4b	I	. 00	1		00
B	I. J.	Taxable pensions and annuities	4d	J	. 00	J		00
Part B		Rents, royalties, partnerships, S corporations, etc. (from schedule 1, part 1)	5	K	. 00	K		00
_	K.	Farm income or (loss) (from schedule 1, part 1)	6	L	. 00	L		00
	L.	, , ,	7	M	. 00	M		00
	M.	Unemployment compensation (from schedule 1, part 1)	5b	N	. 00	N		00
	N.	Taxable social security benefits	8	0	. 00	0		00
	Ο.	Other income (from schedule 1, part 1)		Р	. 00	Р		00
	Ρ.	Total - Add Lines A through O	8a	Q	. 00	Q		00
	Q.	Less: federal adjustments to income	- Ja	<u> </u>		Q		. [00
	H.	SUBTOTAL (Line P - Line Q) If no modifications to income,	8b	R	. 00	R		00
	0	enter this amount on Part C, Line 1	Ob	11],[00]			. [00
	S.	Missouri modifications - additions to federal adjusted gross income		S	. 00	S		00
	_	(Missouri source from Form MO-1040, Line 2)],[00]			. [00
	Т.	, ,		Т	. 00	Т		00
		(Missouri source from Form MO-1040, Line 4)			. [00]			. 00
	U.	MISSOURI INCOME (Missouri sources) Line R plus Line S, less		U	. 00	U		00
		Line T. Enter this amount on Part C, Line 1			. [00]			. [55
	Wiss	souri Income Percentage						
				Υ	ourself or		Spouse	
			(Income Filer	(On A C	ombined Retur	n)
	1.	Missouri Income - Enter wages, salaries, etc. from Missouri. (You mus	+ -					<i></i>
	١.	file a Missouri return if the amount on this line is more than \$600)	1434		00 1	s		. 00
		The a wissour return it the amount on this line is more than \$4000)						
0	2.	Taxpayer's total adjusted gross income (from Form MO-1040, Lines 5Y						
Part C	۷.	and 5S or from your federal form if you are a military nonresident and you	ou 🗆					
<u>~</u>		are not required to file a Missouri return)	2Y		. 00 2	s		. 00
		are not required to the a whose arretarry				'		
	3.	Missouri Income Percentage - Divide Line 1 by Line 2. If greater than						
	٥.	100%, enter 100%. (Round to a whole percent such as 91% instead of						
		90.5% and 90% instead of 90.4%. However, if percentage is less than						
		0.5%, use the exact percentage.) Enter percentage here and on Form						
		MO-1040, Lines 28Y and 28S	3Y		% 3	s		%
		We 1010, Emilio 201 and 200						
	Un	der penalties of perjury, I declare that I have examined this form and to	the best of m	y kn	owledge and believe it is	true, corr	ect, and compl	ete.
		claration of preparer (other than taxpayer) is based on all information o		•	-		•	
	ар	enalty of up to \$500 shall be imposed on any individual who files a frive	olous return.					
ure	Sin	nature			Date (MM/	DD/YY)		
Signature		, . 			Date (IVIIVI)			
Sig	L							
	Spo	ouse's Signature (if filing combined, BOTH must sign)			Date (MM/	DD/YY)		
	- 12.	J , J				_ ·		

Part A, Line 1: Nonresidents of Missouri

If you are a Missouri nonresident and had Missouri source income, complete Part A, Line 1, Part B, and Part C. Attach a copy of your federal return, Form(s) W-2 and 1099 and this form to your Missouri return.

Part A, Line 2: Part-Year Resident

If you were a Missouri part-year resident with Missouri source income and income from another state, you may use Form MO-NRI or Form MO-CR, whichever is to your benefit. When using Form MO-NRI, complete Part A, Line 2, Part B, and Part C. Missouri source income includes any income (pensions, annuities, etc.) that you received while living in Missouri. Attach a copy of your federal return, Form(s) W-2 and 1099 and this form to your Missouri return.

Part A, Line 3: Military Nonresident Tax Status

Missouri Home of Record - If you have a Missouri home of record and you:

- a) Did not have any Missouri income other than military income, were not in Missouri for more than 30 days, did not maintain a home in Missouri during the year, but did maintain living quarters elsewhere, you qualify as a nonresident for tax purposes. Complete Part A, Line 3 and enter "0" on Part C, Line 1.
- b) Did have Missouri income other than military income, were in Missouri for more than 30 days or maintained a home in Missouri during the year, you cannot use this form. You must file Form MO-1040 because 100 percent of your income is taxable, including your military income. **Do not complete this form.**
- c) Did not have Missouri income other than military income but spent more than 30 days in Missouri or maintained a home in Missouri during the year, you must file Form MO-1040 because 100 percent of your income is taxable, including your military income. **Do not complete this form.**
- d) Are married to a Missouri resident, who is not in the military, but lives with you outside of Missouri on military orders, you may use Form MO-NRI to calculate your Missouri income percentage. However, any income earned by your spouse is taxable to Missouri. Your spouse is not eligible to complete Form MO-NRI.

Military Nonresident Stationed in Missouri - If you are a military nonresident, stationed in Missouri and you:

- a) Earned non-military income while in Missouri You must file Form MO-1040. Complete Part A, Line 3, Part B and Part C. The nonresident military pay should be subtracted from your federal adjusted gross income using Form MO-A, Part 1, Line 10, as a "Military (nonresident) Subtraction".
- b) Only had military income while in Missouri You may complete a Military No Return Required Form online at mytax.mo.gov/rptp/portal/business/military-noreturn.

Note: If you file a joint federal return, you **must** file a combined Missouri return (regardless of whom earned the income). Complete each column of Part B and Part C of this form. Do not combine incomes for you and your spouse.

Use this diagram to determine if you or your spouse are a RESIDENT OR NONRESIDENT Are you domiciled* in Missouri? 1. Did you maintain a permanent 1. Did you maintain a permanent place of residency in Missouri? YES NO place of residency in Missouri? 2. Did you spend more than 30 2. Did you spend more than 183 days in Missouri? days in Missouri? **YES** NO to **YES** to NO to either both either to Did you maintain a permanent place of You are a both residency elsewhere? Resident. You are a You are a Nonresident. Resident. NO YES You are a Nonresident (for tax purposes). You are a Resident.

*Domicile (Home of Record) - The place an individual intends to be his or her permanent home; a place that he or she intends to return whenever absent. A domicile, once established, continues until the individual moves to a new location with the true intention of making his or her permanent home there. An individual can only have one domicile at a time.

_	Form REVENUE 2019 Home Energy Audit Expense	Department Use Only (MM/DD/YY)
	al Security Number	Spouse's Social Security Number Spouse's Name
Stre	et Address	
City		State ZIP Code
Qualifications	incurred for the audit and the implementation of any energy efficiency \$1,000, for a single taxpayer or \$2,000 for taxpayers filing combined r	y to complete a home energy audit may deduct 100 percent of the costs recommendations made by the auditor. The subtraction may not exceed returns. To qualify for the subtraction, you must have incurred expenses nust not have been excluded from your federal adjusted gross income or
Instructions	 Enter the total amount paid for the audit and any implemented recommendations on Line C Attach applicable receipts Attach completed MO-HEA and receipts to Form MO-1040 	
	Auditor Name	Auditor Certification Number
	Summary of Recommendations	
	2	
ummary	3	
Auditor Summary	A. Amount paid for audit.	A . 00

Taxation Division Form MO-HEA (Revised 12-2019)

В

С

D

E

00

00

00

A. Amount paid for audit.....

E. Amount from Line C or Line D, whichever is less. Enter here and on Form MO-A, Line 14. If you are

filing a combined return, you may split the amount reported on Line 14 between both spouses.



Social Security Numb	per				
_	_				
Spouse's Social Security Number					
_	_				

Complete this worksheet and attach it, along with proof of premiums paid, to Form MO-1040 if you included health insurance premiums paid as an itemized deduction or had health insurance premiums withheld from your social security benefits.

If you had premiums withheld from your social security benefits, complete Lines 1 through 4 to determine your taxable percentage of social security income and the corresponding taxable portion of your health insurance premiums included in your taxable income.

1.	Enter the amount from Federal Form 1040 or Federal Form 1040-SR, Line your total health insurance premiums paid	· · · · · · · · · · · · · · · · · · ·	enter	1		. 00
2.	Enter amount from Federal Form 1040 or Federal Form 1040-SR, Line 5b			2		. 00
3.	Divide Line 2 by Line 1			3		%
		Yourself (Y)			Spouse (S)	
4.	Enter the health insurance premiums withheld from your social security income	4Y	. 00	4S		. 00
5.	Multiply the amounts on Line 4Y and 4S by the percentage on Line 3	5Y	. 00	5S		. 00
6.	Enter the total of all other health insurance premiums paid, which were not included on 4Y or 4S	6Y	. 00	6S		
7.	Add the amounts from Lines 5 and 6	7Y	. 00	7S		. 00
8.	Add the amounts from Lines 7Y and 7S			8		. 00
9.	Divide Line 7Y and 7S by the total found on Line 8. If you itemized on your federal return and your federal itemized deductions included					_
	health insurance premiums as medical expenses, go to Line 10. If not, go to Line 15	9Y	%	98		%
10.	Enter the amount from Federal Schedule A, Line 1			10		00
11.	Enter the amount from Federal Schedule A, Line 4			11		00
12.	Divide Line 11 by Line 10 (round to full percent)			12		%
13.	Multiply Line 8 by percent on Line 12			13		00
14.	Subtract Line 13 from Line 8			14		00
15.	Enter your federal taxable income from Federal Form 1040 or Federal Form	n 1040-SR, Line 11b		15		. 00
16.	If you itemized on your federal return and completed Lines 10 through 14 a Line 14 or Line 15, whichever is less. If not, enter the amount from Line 8 or	·		16		. 00
17.	Multiply Line 16 by the percentage on Line 9Y and Line 9S. Enter the amounts on Line 17Y and 17S of this worksheet on Line 12 of Form MO-A	17Y	. 00	178]. 00



Department Use Only		
(MM/DD/YY)		

This form must be attached to Form MO-1040 or MO-1040P.

Soci	ial Security Number		Date of Birth (MM/DD/YYYY)
First	t Name	M.I.	Last Name
Spoi	use's Social Security Number		Spouse's Date of Birth (MM/DD/YYYY)
Spoi	use's First Name	M.I.	Last Name
Filing Qualifications	C. 100% Disabled (Attach letter from Social Securion D. 60 years of age or older and received surviving Select only one filing status. If married filing combine	ar reside rvice (Att ity Admir spouse I	ent. (Attach Form SSA-1099.) tach letter from Department of Veterans Affairs - see instructions.) nistration or Form SSA-1099.) benefits (Attach Form SSA-1099.)
	Failure to provide the required attachme	ent(s) wil	I result in the delay or denial of your return.
Income	 Enter the amount of income from Form MO-1040, Lir Enter the amount of nontaxable social security benef minor children before any deductions and the amount retirement benefits. Attach Form(s) SSA-1099 or RR Enter the total amount of pensions, annuities, dividen included in Line 1. Include tax exempt interest from MMO-1040). Attach Form(s) W-2, 1099, 1099-R, 1099 Enter the amount of railroad retirement benefits (not in Attach Form RRB-1099-R (Tier II). If filling Form MO-1040. 	fits receivent of social section of social section of social section of secti	ved by you, your spouse, and your cial security equivalent railroad (TIER I)
	 Enter the amount of veterans payments or benefits be Attach letter from Veterans Affairs (see instructions of 	-	- -



Income (continued)	6.	Enter the total amount received by you, your spouse, and your minor children from: public assistance, SSI, child support, or Temporary Assistance payments (TA and TANF). Attach a letter from the Social Security Administration that includes the total amount of assistance received and Form 1099 from Employment Security, if applicable	6 .	00
	7.	household income (as a positive amount) here. (Include capital loss from Federal Form 1040 or 1040-SR)	7	00
	9.	Total household income - Add Lines 1 through 7 and enter the total here Enter the appropriate amount from the options below	9 .	00
	10.	Net household income - Subtract Line 9 from Line 8 and enter the amount here	10 .	00
		• If you owned and occupied your home for the entire year and Line 10 is greater than \$30,000, you are not eligible to file this claim.		
Real Estate or Rent	11.	If you owned your home, enter the total amount of property tax paid for your home, less special assessments, or \$1,100, whichever is less. Attach a copy of paid real estate tax receipt(s). If your home is on more than five acres or you own a mobile home, attach the Assessor's Certification (Form 948)	11 .	00
Real Est	12.	If you rented, enter the total amount from Certification of Rent Paid (Form(s) MO-CRP), Line 9 or \$750, whichever is less. Attach a completed Verification of Rent Paid (Form 5674). Note : If you rent from a facility that does not pay property tax, you are not eligible for a Property Tax Credit	12 .	00
Credit	13. 14.		13 14	00
		Department Use Only		
	Α	□ K □ R □ U		

This form must be attached to Form MO-1040 or Form MO-1040P.





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	Spouse's Social Security Number				
2	Select this box if related to your landlord. If so, explain. Name (First, Last)					
۷.	Name (First, Last)					
	Physical Address of Rental Unit (P.O. Box Not Allowed)			Apartment Number		
	City	State	ZIP Code			
3.	Landlord's Name (First, Last)					
0.	Earlier of Harris (First, East)					
	Landlord's Last 4 Digits of Social Security Number Landlord's Federal Employer Identification Number (FEIN) - if application application for the control of					
	Landlord's Street Address (Must be completed) Apartment					
	City State ZIP Code					
			1			
4.	Landlord's Phone Number (Must be completed)					
	From:	То:				
5.	Rental Period During Year (MM/DD/YY)	(MM/DD/YY)				
6.	Enter your gross rent paid. Attach a completed Verification of Rent Paid (Form	5674). If you received housir	ng			
	assistance, enter the amount of rent you paid. Note: If you rent from a facility		y tax,	. 00		
	you are not eligible for a Property Tax Credit					
7.	Select the appropriate box below and enter the corresponding percentage on L	ine 7	7	%		
	A. Apartment, House, Mobile Home, or Duplex - 100% F. Low Income Housing - 100% (Rent cannot exceed 40% of to					
household income.) B. Mobile Home Lot - 100%						
	hared your rent with					
	C. Boarding Home or Residential Care - 50% (other than your spouse or children under 18), select the appr box based on the additional persons sharing rent: D. Skilled or Intermediate Care Nursing Home - 45%					
	_	1 (50%) 2 (3	33%) 3 (25	%)		
	E. Hotel - 100%; if meals are included - 50%					
8.	Net rent paid - Multiply Line 6 by the percentage on Line 7		8	. 00		
٥.	paraap., 3 5, are personage on Line /					
9.	Multiply Line 8 by 20%. Enter amount here and on Line 10 of Form MO-PTC of	r Line 12 of Form MO-PTS	9	. 00		

For Privacy Notice, see instructions.

Form MO-CRP (Revised 12-2019)

Form MO-TC	REVENUE 2019 Miscellaneous Income Tax Credits

Department Use Only			
(MM/DD/YY)			

Name					
(Last, First)					
Spouse's Na	me 🗀				
(Last, First)					
Corporation					
Name					
Missouri Tax					
I.D. Number					

Number

Spouse's Social
Security Number

Charter
Number

Federal Employer
I.D. Number

- Benefit Number The number is the last six (6) digits of the number located on your Certificate of Eligibility.
 - Example: For benefit, ABC-2018-12345-123456, enter 123456, on Form MO-TC.
- Alpha code The three (3) character code located on the back of
- this form. Each credit is assigned an alpha code to ensure proper processing of the credit claimed.
- If you are claiming more than 10 credits, attach additional MO-TC(s)
- The sum of the tax credits claimed in Column 1 or Column 2 cannot exceed the applicable tax liability, unless the credit is refundable.

	Benefit Number (See example above)	Alpha Code (3 characters)	Credit Name Each credit will apply against your tax		Yourself Corporation Income Fiduciary	Spouse (on a combined return)
	(Occ example above)	from back	liability in the order they appear below.		Column 1	Column 2
1.				1.	00	00
2.				2.	00	00
3.				3.	00	00
4.				4.	00	00
5.				5.	00	00
6.				6.	00	00
7.				7.	00	00
8.				8.	00	00
9.				9.	00	00
10.				10.	00	00
11	. Subtotals - add Lines 1	I through 10		11.	00	00
12.			om Form MO-1040, Line 29Y for yourself and Line 29S for your spouse, MO-1041, Line 15	12.	00	00
13	. Total Credits - add am Line 38; or Form MO-1	ounts from Lin 041, Line 16.)	e 11, Columns 1 and 2. (Enter here and on Form MO-1120, Line 18; Form M Line 13 cannot exceed the amount on Line 15, unless the credit is refundab	10-10 le	040,	00

Social Security

Use Column 1 if you are filing:

- · An individual income tax return with a single type filing status;
- · A fiduciary return; or,
- A corporation income tax return.

If you are filing a combined return and both you and your spouse have income:

- Use Column 1 for yourself and Column 2 for spouse.
- Both names must be on the credit certificate.

If you are a shareholder or partner claiming a credit, attach a copy of the shareholder listing or Federal Schedule K-1, specifying your percentage and the corporation's percentage of ownership.

I declare under penalties of perjury that I employ no illegal or unauthorized aliens as defined under federal law and that I am not eligible for any tax exemption, credit or abatement if I employ such aliens. I also declare that if I am a business entity, I participate in a federal work authorization program with respect to the employees working in connection with any contracted services and I do not knowingly employ any person who is an unauthorized alien in connection with any contracted services.

Use this form to claim income tax credits on Form MO-1040, MO-1120, or MO-1041. Attach to Form MO-1040, MO-1120, or MO-1041.



Miscellaneous tax credits are administered by various agencies. For more information, forms, and approval to claim these credits, contact the following Departments. Visit http://dor.mo.gov/taxcredit/ for a description of each credit and more contact information for agencies administering each credit.

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Missouri Department of Economic Development

P.O. Box 118, Jefferson City, MO 65102-0118 http://www.ded.mo.gov

Alpha		Attach to
Code	Name of Credit and Phone Number	Form MO-TO
BFC	New or Expanded Business Facility - (573) 526-5417	Schedule 150, Fed. K-1, Form
BJI	Brownfield "Jobs and Investment" - (573) 522-8004	Certificate*
DAL	Distressed Area Land Assemblage - (573) 522-8006	Certificate*
DFH	Dry Fire Hydrant - (573) 751-9048	Certificate*
DPC	Development Tax Credit - (573) 526-3285	Certificate*
EZC	Enterprise Zone - (573) 522-2790	Schedule 250,
		Fed. K-1, Form
FDA	Family Development Account - (573) 751-4539	Certificate*
FPC	Film Production - (573) 751-9048	Certificate*
HPC	Historic Preservation - (573) 522-8004	Certificate*
ISB	Small Business Investment (Capital) - (573) 526-5417	Certificate*
ICT	Innovation Campus Tax Credit - (573) 751-4539	Certificate*
MQJ	Missouri Quality Jobs - (573) 751-4539	Certificate*
MWC	Missouri Works Credit - (573) 522-9062	Certificate*
NAC	Neighborhood Assistance - (573) 522-2629	Certificate*
NEC	New Enterprise Creation - (573) 522-2790	Certificate*
NEZ	New Enhanced Enterprise Zone - (573) 751-4539	Certificate*
NMC	New Market Tax Credit - (573) 522-8004	Certificate*
RCC	Rebuilding Communities - (573) 526-3285	Certificate*
RCN	Rebuilding Communities and Neighborhood	
	Preservation Act - (573) 522-8004	Certificate*
REC	Qualified Research Expense - (573) 526-0124	Certificate*
RTC	Remediation - (573) 522-8004	Certificate*
SBG	Small Business Guaranty Fees - (573) 751-9048	Certificate*
SBI	Small Business Incubator - (573) 751-4539	Certificate*
SEC	Sporting Event Credit - (573) 522-8004	Certificate*
SPC	Sporting Contribution Credit - (573) 522-8004	Certificate*
TDC	Transportation Development - (573) 751-4539	Certificate*
WEC	Processed Wood Energy - (573) 526-1723	Certificate*
WGC	Wine and Grape Production - (573) 751-9048	Certificate*
YOC	Youth Opportunities - (573) 751-4539	Certificate*

Missouri Development Finance Board

P.O. Box 567, Jefferson City, MO 65102-0567 http://www.mdfb.org • (573) 751-8479

Alpha		Attach to
<u>Code</u>	Name of Credit	Form MO-TC
BEC	Bond Enhancement	Certificate*
BUC	Missouri Business Use Incentives for Large	Certificate*
	Scale Development (BUILD)	
DRC	Development Reserve Contribution Credit	Certificate*
EFC	Export Finance	Certificate*
IDC	Infrastructure Development	Certificate*

Missouri Housing Development Commission

3435 Broadway, Kansas City, MO 64111 http://www.mhdc.com

Alpha		Attach to
<u>Code</u>	Name of Credit and Phone Number	Form MO-TC
AHC	Affordable Housing Assistance - (816) 759-6878	Certificate*
LHC	Missouri Low Income Housing - (816) 759-6878	Eligibility Statement
		Fed. K-1, 8609A,
		8609 (first year)

Missouri Department of Revenue

P.O. Box 2200, Jefferson City, MO 65105-2200 http://dor.mo.gov/ • (573) 751-3220 or (573) 751-4541

Alpha		Attach to
Code	Name of Credit	Form MO-TC
ATC	Special Needs Adoption	Form ATC, and
		Federal Form 8839
BFT	Bank Franchise Tax	Form INT-2, INT-2-1

Missouri Department of Revenue (Continued)

BTC	Bank Tax Credit for S Corporation	Form BTC, and Form Shareholders INT-3, 2823, INT-2, Fed. K-
CIC	Children in Crisis	Contribution Verification from Issuing Agency
CFC	Champion for Children	Contribution Verification from Issuing Agency
DAC	Disabled Access	Federal Form 8826 and Form MO-8826
DAT FPT SHC SSC	Residential Dwelling Accessibility Food Pantry Tax Self-Employed Health Insurance Public Safety Officer Surviving Spouse	Form MO-DAT Form MO-FPT Form MO-SHC Form MO-SSC
000	r abile salety Silicer surviving spouse	1 01111 WIO-000

Missouri Agricultural and Small **Business Development Authority**

P.O. Box 630, Jefferson City, MO 65102-0630 http://www.agriculture.mo.gov • (573) 751-2129

Alpha		Attach to
<u>Code</u>	Name of Credit	Form MO-TO
APU	Agricultural Product Utilization Contributor	Certificate*
FFC	Family Farms Act	Certificate*
MPF	Meat Processing Facility Investment Tax Credit	Certificate*
NGC	New Generation Cooperative Incentive	Certificate*
QBC	Qualified Beef	Certificate*

Missouri Department of Natural Resources

Jefferson City, MO 65105 http://www.dnr.mo.gov

Alpha		Attach to
Code	Name of Credit and Phone Number	Form MO-TC
CPC	Charcoal Producers - (573) 751-4817	Certificate*

Missouri Department of Social Services

Jefferson City, MO 65109

http://	www.dss.mo.gov/dfas/taxcredit/index.htm	• (5/3) /51-/533
Alpha		Attach to
<u>Code</u>	Name of Credit	Form MO-TC
DBC	Diaper Bank	Certificate*
DDC	Developmental Disability Care Provider	Certificate*
DVC	Shelter for Victims of Domestic Violence	Certificate*
MHC	Maternity Home	Certificate*
PRC	Pregnancy Resource	Certificate*
RTA	Residential Treatment Agency	Certificate*
SCH	School Children Health and Hunger	Certificate*

Missouri Department of Health **Division of Senior Services**

P.O. Box 570, Jefferson City, MO 65102-0570 http://www.dhss.mo.gov

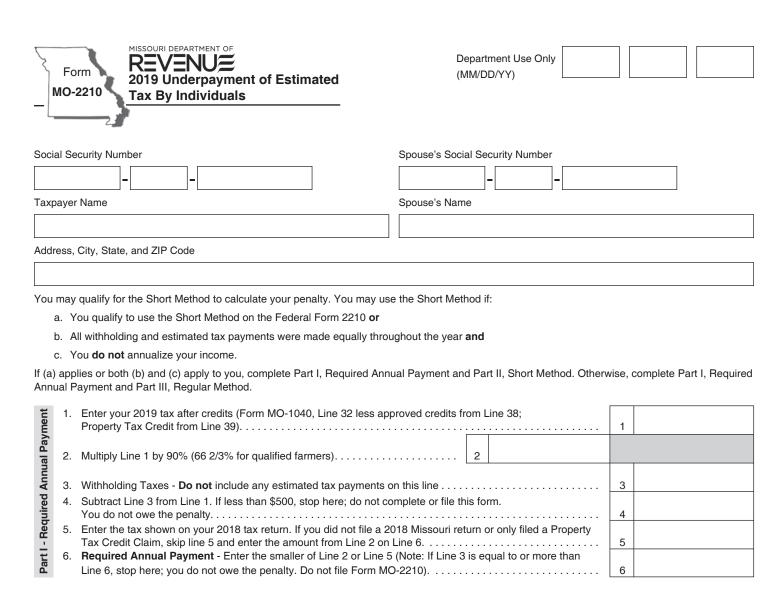
Alpha	
<u>Code</u>	Name of Credit and Phone Number
SCT	Shared Care - (573) 751-4842

Attach to Form MO-TC Must Register Each Year With Division of Senior and Disability Services - Attach Form MO-SCC

Form MO-TC (Revised 03-2020)

^{*} Must be approved by the issuing agency Individuals with speech or hearing impairments may call TTY (800) 735-2966 or fax (573) 522-1762.





	7.	Enter the amount, if any, from Line 3 above	7			
	8.	Enter the total amount, if any, of 2019 estimated tax payments you made	8			
000	9.	Add Lines 7 and 8			9	
	10.	Total Underpayment for Year - Subtract Line 9 from Line 6. If zero or less, stop penalty. Do not file Form MO-2210			10	
-	11.	Multiply Line 10 by .03336			11	
ושבו	12.	If the amount on Line 10 was paid on or after 04/15/20, enter 0 (zero). If the amount before 04/15/20, make the following computation to find the amount to enter on Li				
		Amount on Number of days paid Line 10 X before 04/15/20 X .000	1366		12	
	13.	Penalty - Subtract Line 12 from Line 11. Enter result here and on Form MO-1040,	Line	50	13	
		•				

Part II Instructions - Short Method

- A. **Purpose of the Form** Use this form to determine whether your income tax was sufficiently paid throughout the year by withholding or by estimated tax payments. If it is not, you may owe a penalty on the underpaid amount.
- B. **Short Method** You may use the Short Method if you qualify to use the Short Method on the Federal Form 2210 or, all withholding and estimated tax payments were made equally throughout the year and you do not annualize your income.

If you do not qualify to use the Short Method, you must use the Regular Method.

Section	on A - Figure Your Underpayment										
	nplete Lines 14 through 19. If you meet any of the exceptions directly to Line 20.	(see instruction D) t	o the penalty for all q	uarters, omit Lines	14 through 19 and						
14.	Required annual payment (Enter payment as computed on Pa	art I, Line 6)		14							
		,	Due Dates of								
		Apr. 15, 2019	Jun. 15, 2019	Sept. 15, 2019	Jan. 15, 2020						
15	Required installment payments										
	Estimated tax paid										
17.	Overpayment of previous installments										
18.	Total payments										
19.	Underpayment of current installment										
19a.	Overpayment of current installment										
19b.	Underpayment of previous installments										
19c.	Total overpayment										
19d.	Total underpayment										
Section	on B - Exceptions To The Penalty										
		re in a "comhat zone"	" and instruction .I for	farmers							
	ee instruction D - For special exceptions see instruction I for service in a "combat zone", and instruction J for farmers. Total amount paid and withheld from January 1 through										
	the installment date indicated										
21.	Exception No. 1 - prior year's tax	25% of 2018 Tax	50% of 2018 Tax	75% of 2018 Tax	100% of 2018 Tax						
	2018 tax	050/ 17	500/ 17	750/ 17	1000/ ST						
22.	Exception No. 2 - tax on prior year's income using 2019	25% of Tax	50% of Tax	75% of Tax	100% of Tax						
	rates and exemptions	22.5% of Tax	45% of Tax	67.5% of Tax							
23.	Exception No. 3 - tax on annualized 2019 income										
	Exception No. 4 - tax on 2019 income over 3, 5, and 8	90% of Tax	90% of Tax	90% of Tax							
	month periods										
Saction	on C - Figure the Penalty										
	·										
Con	nplete Lines 25 through 29										
	Amount of underpayment										
20.	whichever is earlier										
27a.	Number of days between the due date of installment, and either date of payment, the due date of the next										
	installment, or December 31, 2019, whichever is earlier										
27b.	Number of days from January 1, 2020 or installment date to date of payment or April 15, 2020										
28a.	Multiply the 5% annual interest rate times the amount on										
28h	Line 25 for the number of days shown on Line 27a										
200.	Line 25 for the number of days shown on Line 27b										
	Total Penalty (Line 28a plus Line 28b)										
29.	Total amount on Line 28c. Show this amount on Line 50 of F Penalty". If you have an underpayment on Line 49 of Form M										
	the amount equal to the total of Line 49 and the penalty amo										
	Department of Revenue will reduce your overpayment by the										

Note: If this form is not filed with Form MO-1040, attach check or money order payable to "Department of Revenue" and mail.

Taxation Division

E-mail: income@dor.mo.gov

Taxation Division P.O. Box 329 Jefferson City, MO 65107-0329

Part III Instructions - Regular Method

- A. **Purpose of the Form** Use this form to determine whether your income tax was sufficiently paid throughout the year by withholding or by estimated tax payments. If it is not, you may owe a penalty on the underpaid amount.
- B. Filing an Estimated Tax Payment and Paying the Tax for Calendar Year Taxpayers If you file returns on a calendar year basis and are required to file Form MO-1040ES, you are generally required to file an estimated tax payment by April 15, and to pay the tax in four installments. (If you are not required to file an estimated tax payment until later in the year because of a change in your income or exemptions, you may be required to pay fewer installments.) The chart below shows the due date for estimated tax payments and the maximum number of installments required for each.

Period Requirements First Met	Due Date of Estimated Tax Payments	Maximum Number of Installments Required
Between Jan. 1 and Apr. 1	Apr. 15	4
Between Apr. 2 and Jun. 1	Jun. 15	3
Between Jun. 2 and Sept.1	Sept. 15	2
After Sept. 1	Jan. 15	1

When the due date falls on a Saturday, Sunday, or legal holiday, the estimated tax payment will be considered timely if filed on the next business day.

- C. **Fiscal Year Taxpayers** Fiscal year taxpayers should substitute for the due dates above, the 15th day of the first and last months of the second quarter of your fiscal year; the 15th day of the last month of the third quarter; and the 15th day of the first month of your next fiscal year.
- D. Exception to the Penalty You will not be liable for a penalty if your 2019 tax payments (amounts shown on Line 20) equal or exceed any amount determined for the same period under the following exception provisions. You may apply a different exception to each underpayment. Please enclose a separate computation page for each payment. If none of the exceptions apply, complete Lines 15 through Line 29.

The percentages shown on Lines 21, 22, and 23, for the April 15, June 15, and Sept. 15 installment dates, are for calendar year taxpayers required to pay installments on four dates.

Exception 1 - Prior Year's Tax - This exception applies if your 2019 tax payments equal or exceed the tax shown on your 2018 tax return. The 2018 return must cover a period of 12 months and show a tax liability.

Exception 2 - Tax on Prior Year's Income using 2019 Rates and Exemptions - This exception applies if your 2019 tax withheld and estimated tax payments equal or exceed the tax that would have been due on your 2018 income if you had computed it at 2019 rates. To determine if you qualify for this exception, use the personal exemptions allowed for 2019, but use the other facts and law applicable to your 2018 return.

Exception 3 - Tax on Annualized 2019 Income - This exception applies if your 2019 tax payments equal or exceed 90 percent of the tax on your annualized taxable income for periods from the first of the year to the end of the month preceding that month in which an installment is due. To annualize your taxable income, follow these four steps.

- (a) Figure your adjusted gross income less itemized deductions from the first of your tax year up to and including the month prior to that month in which an installment is due; or, if you use the standard deduction, figure your adjusted gross income for that period.
- (b) Divide the result of step (a) by the number of months in your computation period.
- (c) Multiply the result of step (b) by 12.
- (d) Subtract the deduction for federal tax and, if you did not itemize, subtract the standard deduction. The result is your annualized taxable income.

Exception 3 may not be used for the fourth installment period.

Example I (Combined return)

1.	Wages, received during Jan., Feb., and Mar\$6,000	į
2.	Self-employment income during Jan., Feb., and Mar\$4,000	į
3.	Adjusted gross income	ı
4.	Annualized income (\$10,000 ÷ 3 x 12) \$40,000	1
5.	Less:	
	(a) Standard deduction	1
	(b) Federal tax (joint return)	ı
6.	Annualized taxable income	ı
7.	Income Tax (from Missouri tax chart)	

If your tax withheld and estimated tax payment for the first installment period of 2019 were at least \$130 (22.5 percent of \$577), you do not owe a penalty for that period.

Exception 4 - Tax on 2019 Income Over Periods of 3, 5, and 8 months - This exception applies if your 2019 tax payments equal or exceed 90 percent of the tax on your taxable income for periods starting from the first of the year to the end of the month preceding that in which an installment is due. This exception does not apply to the fourth quarter. To determine if this exception applies for the first three quarters, figure your taxable income from January 1, 2019 to the end of the month preceding that month in which an installment is due. Then compute your tax on that amount a though it represented your taxable income for 2019.

Example II (Combined return using standard deduction)

	· • · · · · · · · · · · · · · · · · · ·			
(1)	(2)	(3)	(4)	(5)
Computation Period	<u>Income</u>	<u>Tax</u>	90 percent of Tax	Tax Withheld
Jan. 1 to Mar. 31	\$15,000	\$0	\$0	\$275
Jan. 1 to May 31	\$30,000	\$145	\$131	\$458
Jan 1 to Aug 31	\$35,000	\$392	\$353	\$733

Since the amounts in column (5) are greater than those in column (4) for each of the first three computation periods, there is no penalty for the first three installment periods.

- E. **Figure the Addition to Tax** For Line 27a, enter the number of days from the due date of the installment to the date of payment or December 31, 2019, whichever is earlier. If the payment date on Line 26 is December 31, 2019, or later and the due date of the installment is April 15, 2019, then enter 260 days; for June 15, 2019, 199 days; and for September 15, 2019, 107 days.
 - For Line 27b, enter the number of days from January 1, 2020 or the 2020 installment due date to date of payment or appropriate due date of return, whichever is earlier. If the payment date is April 15, 2020, enter 105 days for the first, second, and third quarters and 91 days for the fourth quarter.
- F. **Tax Withheld** You may consider an equal part of the income tax withheld during the year as paid on each required installment date, unless you establish the dates on which the withholding occurred and consider it paid on those dates.
- G. **Overpayment** Apply as credit against the next installment any installment overpayment shown on Line 19a that is greater than all prior underpayments.
- H. **Installment Payments** If you made more than one payment for any installment, enclose a separate computation for each payment. If you filed your return and paid the balance of tax due on or before January 31, 2020, consider the balance paid as of January 15, 2020.
- I. Exception from the Addition to Tax for Service in a Combat Zone You may be exempt from a penalty for underpayment of estimated tax if you served in the U.S. Armed Forces in an area designated by the President as a combat zone under conditions which qualified you for hostile fire pay. If you are exempt for this reason, write on Line 19, for the applicable installment dates, "Exempt, combat zone."
- J. Farmers If (1) your Missouri gross income from farming is at least two-thirds of your total Missouri gross income and (2) you filed a Missouri Individual Income Tax Return and paid tax on or before March 1, 2020, you are exempt from charges for underpayment of estimated tax. If so, write on Line 1, "Exempt, farmer".
 - If you meet this gross income test but did not file a return or pay the tax when due, complete this form with respect to the last quarter only. Qualified farmers would enter all of Line 14 in the fourth quarter and calculate the appropriate underpayment.

Line-by-Line Instructions

Complete Lines 15 through 19d for each installment period, then complete Lines 25 through 29.

- 14. Enter the required annual payment, as computed on Part I, Line 6.
- 15. Divide the required annual payment (Line 14) by the number of required installments. If the estimated tax was the result of a change in income or exemptions during the year, you may require fewer installments. Otherwise, divide the required annual payment by four and place the amount in each column. (See instructions for farmers.)
- 16. Enter the amount of tax paid during the installment period. (The tax withheld throughout the year may be considered as paid in four equal parts on the due date of the installment, unless a different date is established.)
- 17. Enter the amount, if any, of overpayment reported on Line 19c from the previous installment period.
- 18. Enter the sum of Line 16 and Line 17.
- 19. If the amount on Line 15 is greater than the amount on Line 18, enter the difference here. You have underpaid for the installment period. If not, skip this line and go to Line 19a.
- 19a. If the amount on Line 18 is greater than the amount on Line 15, enter the difference here. You have overpaid for the installment period.
- 19b. Enter the amount of the underpayment (if any) from Line 19d of the previous column.
- 19c. and 19d.
 - If you filled in Line 19 of this column, add the amount on Line 19b to the amount on Line 19 and enter that total on Line 19d. If you filled in Line 19a of this column, and the amount on Line 19a is greater than any amount on Line 19b, enter the difference on Line 19c. You are overpaid. If the amount on Line 19b is greater than the amount on Line 19a, enter the difference on Line 19d. You are underpaid. See Part III instructions for Lines 20 through 24.
- 25. If you have an underpayment for the installment period and none of the exceptions on Lines 20 through 24 apply, enter on Line 25 the amount of the underpayment on Line 19d. If you do not have an underpayment, or if an exception applies, leave this blank and skip the remaining lines of the column.
- 26. Enter the date a payment was made on the installment, the due date of the following installment, or April 15, 2020, whichever is earlier. If more than one late payment was made to cover the installment, attach a separate computation for each payment during the installment period.
- 27a. Enter the number of days from the due date of the installment to the date entered on Line 26.
- 27b. Enter the number of days from January 1, 2020 (or a later date, if the installment date was after January 1) until either the date of the payment or April 15, 2020, whichever is earlier.
- 28a. Multiply the amount on Line 25 by the number of days on Line 27a. Divide this amount by 365 days and multiply the product by five percent. This is the penalty accruing on the underpayment during 2019.
- 28b. Multiply the amount on Line 25 by the number of days on Line 27b. Divide this amount by 366 days and multiply the product by five percent. This is the penalty accruing on the underpayment during 2020.
- 28c. Add the amounts on Lines 28a and 28b.
- 29. Add the sum of the amounts on Line 28c in the final column, if applicable.

PART 2 - MISSOURI ITEMIZED DEDUCTIONS

You cannot itemize your Missouri deductions if you took the standard deduction on your federal return. See page 8, Line 14. You must itemize your Missouri deductions if you were required to itemize on your federal return.

LINE 1 - FEDERAL ITEMIZED DEDUCTIONS

Include your total federal itemized deductions from Federal Form 1040 or Federal Form 1040-SR, Line 9, and any **approved** cultural contributions (literary, musical, scholastic, or artistic) to a tax exempt agency or institution that is operated on a not-for-profit basis. **Cash contributions do not qualify.**

LINES 2 AND 3 - SOCIAL SECURITY TAX

Include the amount of the social security tax withheld from your Form(s) W-2. **This amount cannot exceed \$8,240.** Enter the total on Line 2. Repeat for your spouse and enter the total on Line 3.

LINES 4 AND 5 - RAILROAD RETIREMENT TAX

Include the amount of railroad retirement tax withheld from your wages, Tier I and Tier II, during 2019. **This amount cannot exceed \$13,076** (Tier I maximum of \$8,240 and Tier II maximum of \$4,836). Enter the total on Line 4. Repeat for your spouse and enter the total on Line 5. **If you have both social security and Tier I railroad retirement tax, the maximum deduction allowed is the amount withheld as shown on the Form(s) W-2 less either the amount entered on Federal Form 1040 or Federal Form 1040-SR, Schedule 3. Part 2, Line 11, or, if only one employer, the amount refunded by the employer.**

LINE 6 - MEDICARE TAX

Include the total amount of Medicare tax for yourself and spouse (combined). If you are not subject to "additional Medicare tax" on your federal return, enter the amount from your Form W-2.

If you are subject to "additional Medicare tax" on your federal return, enter the amounts as calculated below. You must attach a copy of Additional Medicare Tax (Federal Form 8959).

- Wage income: Form(s) W-2, Box 6, plus Line 7 of Federal Form 8959, less Line 22 of Federal Form 8959;
- Railroad retirement compensation: Railroad retirement Medicare tax withheld on Form(s) W-2, Box 14, plus Line 17 of Federal Form 8959, less Line 23 of Federal Form 8959.

LINE 7 - SELF-EMPLOYMENT TAX

Include the amount from Federal Form 1040 or Federal Form 1040-SR, Federal Schedule 2, Part 2, Line 4 less, Federal Schedule 1, Part 2, Line 14, plus Federal Form 8959, Line 13; or Federal Form 1040NR, Line 55 less Line 27, plus Federal Form 8959, Line 13.

LINE 9 - STATE AND LOCAL INCOME TAXES

Include the amount of income taxes from Federal Form 1040 or 1040-SR, Schedule A, Line 5. The overall limit on state and local income taxes plus property taxes, is \$5,000 for married filing separately and \$10,000 for all other taxpayers (single, married filing combined, head of household). If the sum of these deductions exceeds this limit, use the worksheet on MO-A, Part 2 to determine the state income tax portion of the state tax deduction.

LINE 10 - EARNINGS TAXES

If you entered an amount on Line 9 and you live or work in the Kansas City or St. Louis area, you may have included earnings taxes. Include on Line 10 the amount of earnings taxes withheld shown on Form(s) W-2. See page 22, Diagram 1, Box 19.

LINE 12 - TOTAL MISSOURI ITEMIZED DEDUCTIONS

If your total Missouri itemized deductions are less than your standard deduction (see page 8, Line 14), you should take the standard deduction on Form MO-1040, Line 14, unless you were required to itemize your federal deductions.

PART 3 - PENSION AND SOCIAL SECURITY/ SOCIAL SECURITY DISABILITY/MILITARY EXEMPTION

If you are claiming a pension, social security, social security disability, or military exemption, you must attach a copy of your federal return (pages 1 and 2), your Form(s) 1099-R, and SSA-1099. Failure to provide this information will result in your exemption being disallowed.

Public Pension Calculation

Public pensions are pensions received from any federal, state, or local government. If you have questions about whether your pension is a public or a private pension, contact your pension administrator.

LINE 1 - MISSOURI ADJUSTED GROSS INCOME

Include your Missouri adjusted gross income from Form MO-1040, Line 6.

LINE 2 - TAXABLE SOCIAL SECURITY BENEFITS

Include the taxable 2019 social security benefits for each spouse. This information can be found on Federal Form 1040 or Federal Form 1040-SR. Line 5b.

LINE 6 - TAXABLE PUBLIC PENSION

Include the taxable 2019 public and military pension(s) for each spouse. This information can be found on Federal Form 1040 or Federal Form 1040-SR, Line 4d.

Do not include any payments from private pensions, social security benefits or railroad retirement payments on this line. (Exception: If you are 100 percent disabled, you may consider railroad retirement as taxable public pension.)

LINE 8 - SOCIAL SECURITY OR SOCIAL SECURITY DISABILITY EXEMPTION

Include the amount from Lines 6Y and 6S from Part 3 of the MO-A, Section C (social security or social security disability calculation), unless you are a single individual with income greater than \$85,000 or a married couple with income greater than \$100,000. For single individuals with income greater than \$85,000 enter the amount from Line 8 of Section C. For married couples with income greater than \$100,000, multiply Line 8 by the percentages on Line 3Y and 3S of the Worksheet for Lines 4 and 5 (page 44), and enter those amounts here. If the social security or social security disability exemption, Section C, Line 8 is \$0, enter \$0 on Line 8 of the public pension calculation.

LINE 2 - TAXABLE SOCIAL SECURITY BENEFITS

Include the taxable 2019 social security benefits. This information can be found on Federal Form 1040 or Federal Form 1040-SR. Line 5b.

LINE 6 - TAXABLE PENSION

Include the taxable 2019 pension received from private sources for each spouse. This information can be found on Federal Form 1040 or Federal Form 1040-SR, Lines 4b and 4d. **Do not include any payments from public pensions, social security benefits, or railroad retirement payments on this line.**

Social Security or Social Security Disability Calculation

LINE 4 - TAXABLE SOCIAL SECURITY BENEFITS

To take the social security exemption, you must be age 62 or older. An individual that receives social security retirement benefits, partial benefits at age 62, full benefits at age 65 or older, or a disabled individual receiving Social Security Disability Income (SSDI), who reaches full retirement age during the taxable year and receives retirement benefits should include on Line 4, the amount of federal taxable benefits, which can be found on Federal Form 1040 or Federal Form 1040-SR, Line 5b.

Taxable social security benefits must be allocated by each spouse's share of the benefits received for the year. To determine each spouse's portion of the taxable social security on Line 4, complete Worksheet for Lines 4 and 5 below.

LINE 5 - TAXABLE SOCIAL SECURITY DISABILITY BENEFITS

A disabled individual receiving Social Security Disability Income (SSDI) for the entire taxable year should enter on Line 5 the amount of **federal taxable benefits**, which can be found on Federal Form 1040 or Federal Form 1040-SR, Line 5b.

Taxable social security disability benefits must be allocated by each spouse's share of the benefits received for the year. To determine each spouse's portion of the taxable social security disability on Line 5, complete the Worksheet for Lines 4 and 5 below.

Note: A taxpayer filing single, head of household, qualifying widow(er), or married filing separate may not enter amounts on both Line 4, Taxable Social Security Benefits, and Line 5, Taxable Social Security Disability Benefits. Report only Social Security Benefits on Line 4 and Social Security Disability Benefits on Line 5. However, if you are married filing a combined return, one spouse may enter an amount on Line 4 and the other spouse may enter an amount on Line 5.

Worksheet for Lines 4 and 5 1. Total social security - Enter amount from Federal Form 1040 or Federal Yourself Spouse 2. Enter each spouse's portion of the total social security 2Y ___ 3. Divide Line 2Y and 2S by Line 1 3Y _____% 3S _ 4. Taxable social security - Enter amount from Federal Form 1040 or Federal Form 1040-SR, Line 5b . . . 4) ___ 5. Multiply Line 4 by percentages on 3Y and 3S and enter amounts here and on Lines 4 or 5 of Part 3 of the MO-A. Section C...... 5Y ___ __ 5S _

Military Pension Calculation

A military pension is a pension received for your service in a branch of the armed services of the United States, including the Missouri Army Reserve and Missouri National Guard. You must reduce your military pension exemption by any portion of your military pension that is included in the calculation of your public pension exemption. Make sure you complete the Public Pension Calculation (Section A) **before** you calculate your military pension exemption.

LINE 1 - TAXABLE MILITARY RETIREMENT BENEFITS

Include your total military retirement benefits reported on Federal Form 1040 or Federal Form 1040-SR, Line 4d. If you are filing a combined return and both spouses had military retirement, combine those amounts on Line 1.

LINE 2 - TAXABLE PUBLIC PENSION

Include your total retirement benefits from public sources (including military) reported on Federal Form 1040 or Federal Form 1040-SR, Line 4d. If you are filing a combined return and both spouses had retirement benefits from public sources, combine those amounts on Line 2.

LINE 4 - MILITARY BENEFITS INCLUDED IN PUBLIC PENSION EXEMPTION

Multiply the percentage calculated on Line 3 by the total public pension amount reported on Line 11 of Section A. If you did not claim a public pension, enter \$0.

FORM MO-PTS

Information to Complete Form MO-PTS

If you qualify for the Property Tax Credit you must attach Form MO-PTS to your Form MO-1040 and mail to: Missouri Department of Revenue, P.O. Box 2800, Jefferson City, MO 65105-2800.

Important: You must complete Form MO-1040, Line 1 through Line 38, before you complete Form MO-PTS.

Note: If your filing status on Form MO-1040 is married filing combined, but you and your spouse lived at different addresses the entire year, you may file a separate Property Tax Credit Claim (**Form MO-PTC**). Do not include spouse name or social security number if you selected married filing separate. (Example: One spouse lives in a nursing home or residential care facility while the other spouse remains in the home the entire year.) If filing a separate **Form MO-PTC**, you cannot take the \$2,000 or \$4,000 deduction on Line 7 and you cannot calculate your Property Tax Credit on Form MO-PTS.

Qualifications

Select the applicable box to indicate under which qualification you are filing the Form MO-PTS. You must select a qualification box to be eligible for the credit. Select only one box. **Attach the appropriate documentation to verify your qualification.** (The required documentation is listed behind each qualification on Form MO-PTS.)

Helpful Hints

If you are married or lived together for any part of the year, you must file married filing combined and include all household income.

LINE 2 - SOCIAL SECURITY BENEFITS

Enter the amount of nontaxable social security benefits received by you, your spouse and your minor children before any deductions and the amount of social security equivalent railroad retirement benefits. See below to determine nontaxable benefits:

Fodoral Form 1040 or Fodoral Form 1040 SD Line Faloss Line Fl

- Federal Form 1040 or Federal Form 1040-SR, Line 5a less Line 5b
- Form(s) SSA-1099 and Payments by the Railroad Retirement Board (Federal Form RRB-1099), total amount before deductions (if you did not include an amount on Federal Form 1040 or Federal Form 1040-SR).

Lump sum distributions from Social Security Administration and other agencies must be claimed in the year in which they are received. Attach Form SSA-1099 or RRB-1099 (TIER I).

Helpful Hints

- Wait to file your return until you receive your Form SSA-1099 in January 2020. This form will list your benefits for the entire 2019 year. See the sample Form SSA-1099 on page 15.
- If you are receiving railroad retirement benefits, you should get two Forms RRB-1099. Form RRB-1099R shows annuities and pensions. Form RRB-1099 shows your social security equivalent railroad retirement benefits. Include the amount from Form RRB-1099 that states social security equivalent (usually Tier I benefits) on Line 2.

LINE 3 - EXEMPT INTEREST AND PENSION INCOME

Enter the amount of pensions, annuities, rental income, dividends, or exempt interest income not included on Form MO-PTS, Line 1. (Do not include amount of excludable costs of pensions or annuities.) See the following to determine the amount of your pension or exempt interest:

- Form(s) 1099-R Total amount before deduction not included on Form MO-1040, Line 6 (Missouri adjusted gross income).
- Form 1099-INT Total amount not included on Form MO-1040, Line 6 (Missouri adjusted gross income). Include tax exempt interest from Form MO-A, Part 1, Line 8.

If grants or long-term care benefits are made payable to a nursing facility, do not include as income or rent.

LINE 4 - RAILROAD RETIREMENT BENEFITS

Enter railroad retirement benefits **before** any deductions for medical premiums or withholdings of any kind from Form MO-A, Part 1, Line 10. **Attach a copy of your Form RRB-1099-R.** (Do not include social security equivalent railroad retirement included on Line 2.)

LINE 5 - VETERAN BENEFITS

If a veteran is 100 percent disabled not due to military service, payments and benefits must be included on line 4. Veteran payments and benefits include education and training allowances, disability compensation, grants, and insurance proceeds.

If a veteran is 100 percent disabled as a result of military service, do not include veteran payments and benefits as household income on Form MO-PTS.

If a veteran is less than 100 percent disabled, but is unable to engage in substantial gainful activity due to medical impairments(s) resulting entirely from military service, and such medical impairment(s) can be expected to result in death or has lasted or can be expected to last continuously for at least twelve months, do not include veteran payments and benefits as household income on Form MO-PTS.

A letter from the Veterans Administration detailing the amount of benefits or confirming the disability is 100 percent from military service must be attached.

Note: To request a copy of the letter, call the Veterans Administration at (800) 827-1000.

If you are a surviving spouse receiving social security and your spouse was 100 percent disabled as a result of military service, all veteran payments and benefits must be included.

LINE 6 - PUBLIC ASSISTANCE

Include the amount of public assistance, Supplemental Security Income (SSI), child support, unemployment compensation, and Temporary Assistance payments received by you and your minor children. Temporary Assistance payments include Temporary Assistance for Needy Families (TANF) payments. In Missouri, the program is referred to as Temporary Assistance (TA). This includes any payments received from the government. Do not include the value of commodity foods, food stamps, or heating and cooling assistance. Attach a letter from the Social Security Administration that includes the total amount of assistance received and Form 1099 from Employment Security, if applicable.

Helpful Hints

- Supplemental Security Income (SSI) is paid by the Social Security Administration. You have to request an SSI form indicating total benefits received either through a my Social Security account at https://www.ssa.gov/myaccount/, by calling 1-800-772-1213, or contacting your local Social Security office. If you have minor children who receive SSI benefits, the children do not qualify for a credit. However, if you qualify for a credit, you must include the children's SSI benefits on Line 6.
- If you receive temporary assistance from the Children's Division (CD) or Family Support Division (FSD), you must include all cash benefits received for your entire household. The Department of Revenue verifies this information and failure to include total benefits may delay your refund.

LINE 7 - NONBUSINESS LOSS(ES)

Complete Line 7 only if nonbusiness losses reduced the amount reported on Form MO-PTS, Line 1. If Line 1 was reduced by nonbusiness losses, add back the amount of the loss on Line 7. A nonbusiness loss is a loss of income that did not result from a trade or business. (Losses from Federal Form 1040 or 1040-SR, Schedule F and Schedule C are considered business losses and should not be included here.)

LINE 9 -FILING DEDUCTION

If you are **Single or Married Living Separate**, enter \$0 on Line 9. If you are **Married and Filing Combined**, see below to determine the amount to enter on Line 9.

- If you **RENTED** or did not own your home for the entire year, enter \$2,000 on Line 9.
- If you OWNED and OCCUPIED your home for the entire year, enter \$4,000 on Line 9.

LINE 10 - NET HOUSEHOLD INCOME

Subtract Line 9 from Line 8 and enter amount on Line 10.

- If you RENTED or did not own and occupy your home for the entire year, the amount you enter on Line 10 cannot exceed \$27,500. If the amount of your net household income on Line 10 is above \$27,500, you are not eligible for the credit. There is no need to complete and submit the form.
- If you OWNED and OCCUPIED your home for the entire year, the amount you enter on Line 10 cannot exceed

\$30,000. If the amount of your net household income on Line 10 is above \$30,000, you are **not eligible** for the credit. There is no need to complete and submit the form.

Note: Your home or dwelling is the place in which you reside in Missouri, whether owned or rented, and the surrounding land, not to exceed five acres, as is reasonably necessary for use of the dwelling as a home. A home may be part of a larger unit such as a farm or building partly rented or used for business

LINE 11 - OWN YOUR HOME

If you owned and occupied your home, include the amount of real estate tax you paid for 2019 only, or \$1,100, whichever is less. **Do not include special assessments (sewer lateral), penalties, service charges, and interest listed on your tax receipt.** You can only claim the taxes on your **primary** residence that you occupy. Secondary homes are not eligible for the credit.

Attach a copy of paid real estate tax receipt(s) from the county and city collector's offices.

If you submit more than one receipt from a city or county for your residence, please submit a letter of explanation.

If your home or farm has more than five acres or you own a mobile home that is classified as personal property, an Assessors Certification (Form 948) must be attached with a copy of your paid personal or real property tax receipt. If you own a mobile home, and it is classified as real property, a Form 948 is not needed. In such cases, you can claim property tax for the mobile home and rent for the lot. A credit **will not** be allowed on vehicles and other items listed on the personal property tax receipt.

If you bought, sold, or shared your home, report only the portion of real-estate tax paid by you.

If you use your home for business purposes, the percentage of your home that is used for business purposes must be subtracted from your real estate taxes paid. If you need to use a Form 948 to calculate the amount of real estate tax, you must subtract the percentage of your home that is used for business purposes from allowable real estate taxes paid.

Example: Ruth has 10 acres surrounding her house. She needs to use a Form 948, because she is only entitled to receive credit for 5 acres. By her calculations, she enters \$500 on Form 948, Line 6. Ruth also uses 15 percent of her house for her business. She will multiply \$500 by 85 percent and enter this figure (\$425) on Form MO-PTS, Line 11.

LINE 12 - RENT YOUR HOME

Complete one Certification of Rent Paid (Form MO-CRP) for **each** rented home (including mobile home or lot) you occupied during 2019. You cannot claim returned check fees, late fees, security and cleaning deposits, or any other deposits.

Add the totals from Line 9 on all Form(s) MO-CRP completed, and enter the amount on Line 12, or \$750, whichever is less. Attach a completed Verification of Rent Paid (Form 5674), along with Form(s) MO-CRP. Forms may be obtained by visiting the Department's website at: https://dor.mo.gov/forms/.

If you have the same address as your landlord, please verify the number of occupants and living units.

Helpful Hints

If you receive low income housing assistance, the rent you claim may not exceed 40 percent of your income. Please claim only the amount of rent you paid or your refund will be delayed or denied. If you rent from a facility that does not pay real estate taxes, you are not eligible for a property tax credit. If your gross rent paid exceeds your household income, you must attach a detailed statement explaining how the additional rent was paid or the claim will be denied.

LINE 13 - TOTAL REAL ESTATE TAX/RENT PAID

Add amounts from Form MO-PTS, Lines 11 and 12 and enter amount on Line 13, or \$1,100, whichever is less.

Example: Ester owns her home for three months and pays \$100 in property taxes. For nine months she rents an apartment and pays \$4,000 in rent. The amount on Line 9 of the Form MO-CRP is \$800 (\$4,000 x 20 percent). Form MO-PTS, Line 11, is \$100; Line 12 is \$750; and Line 13 is \$850. The \$800 for rent is limited on Line 12 to \$750.

Helpful Hints

Real estate tax paid for a **prior year cannot** be claimed on this form. To claim real estate taxes for a prior year, you must file a claim for that year.

Example: If you paid your 2018 real estate tax in calendar year 2019, you must file a 2018 Property Tax Credit Claim. If you own your home and other adults (other than spouse) live there and pay rent, the rent must be included in your federal adjusted gross income.

LINE 14 - PROPERTY TAX CREDIT

Apply Lines 10 and 13 to the Property Tax Credit Chart on pages 49, 50, and 51 to determine the amount of your property tax credit. If you have another income tax or property tax credit liability, this property tax credit may be applied to that liability in accordance with **Section 143.782, RSMo.** You will be notified if your credit is offset against any debts.



INFORMATION TO COMPLETE FORM MO-CRP

Form MO-CRP must be completed by taxpayers who rented their home and are submitting a Property Tax Credit Claim.

If you rent from a tax exempt facility, you do not qualify.

- Step 1: Enter all information requested on Lines 1-5. If rent is paid to a relative, the relationship to the landlord must be indicated on Line 1. Your claim may be delayed if you fail to enter all required information.
- Step 2: Enter on Line 6 the gross rent paid. Exclude rent paid for any portion of your home used in the production of income, and the rent paid for surrounding land with attachments not necessary nor maintained for homestead purposes. Also, exclude any rent paid to your landlord on your behalf by any organization.
- Step 3: If you were a resident of a nursing home or boarding home during 2019, use the applicable percentage on Line 7. If you lived in a hotel and meals were included in your rent payment, enter 50 percent; otherwise enter 100 percent. If two or more unmarried individuals over 18 years of age shared a residence and each paid part of the rent, enter the total rent on Form MO-CRP, Line 6 and select the appropriate percentage on box G of Line 7. If the rent receipt is for the total rent amount, then the percentage on box G of the Form MO-CRP must be used to determine your credit.

If none of the reductions apply to you, enter 100 percent on Line 7.

- **Step 4:** Multiply Line 6 by the percentage on Line 7. Enter this amount on Form(s) MO-CRP, Line 8.
- **Step 5:** Multiply Line 8 by 20 percent and enter the result on Line 9. Add the totals from Line 9 on all completed Form(s) MO-CRP and enter the amount on Line 12 of Form MO-PTS.

Helpful Hints

An **apartment** is a room or suite of rooms with separate facilities for cooking and other normal household functions. A **boarding home** is a house that provides meals, lodging, and the residents share common facilities.



What Is Form MO-1040V and Why Should I Use It?

Form MO-1040V, Individual Income Tax Payment Voucher, is the voucher you send with your payment when you do not make the payment with your income tax return. It is similar to vouchers returned with loan, utility, and credit card payments. Form MO-1040V ensures that your payment will be processed more efficiently and accurately. Form MO-1040V allows you to file your completed income tax return and send your payment at a later date. Your income tax return and payment are due no later than April 15, 2020.

When Should I Use Form MO-1040V?

If you have an amount due on an electronically filed return, or do not submit payment in full when you file your income tax return, send Form MO-1040V with your payment. DO NOT use Form MO-1040V for making extension payments. Please use Form MO-60 or visit our website to pay online.

How Do I Fill In the Payment Voucher?

Complete the name(s) and address block.

- Social Security Number Enter your social security number (SSN). If you are filing a combined return, enter your and your spouse's SSN(s) in the order they appear on the return; placing your spouse's SSN in the appropriate field below.
- Name Control Enter the first four letters of your last name. See examples. If you are filing a combined return, enter your and your spouse's name control in the order they appear on the return, placing your spouse's name control in the appropriate field below.

Name Enter

again electronically.

John Brown **BROW** Juan De Jesus DEJE Joan A. Lee LEE **MCCA** Jean McCarthy John O'Neill ONEI **TORR** Pedro Torres-Lopez

MISSOURI DEPARTMENT OF

Please use capital letters as shown.

· Amount of Payment - Enter the amount of your payment in whole dollars.

How Do I Make My Payment?

- Make your check or money order payable to the "Missouri Department of Revenue." Do not send cash (U.S. funds only). Do not postdate your check; it will be cashed upon receipt. The Department of Revenue may collect on checks returned for insufficient or uncollected funds electronically.
- Write your name, address, SSN, daytime telephone number, and "2019 MO Income Tax" on your check or money order.
- Detach the payment voucher at the perforation, and mail with your payment. Do not mail a copy of your previously filed return.
- Please mail your Form MO-1040V and payment to:

Missouri Department of Revenue

P.O. Box 371

Jefferson City, MO 65105-0371

Please print as shown below in black or dark blue ink. Do not use red ink or pencil. 3 2 В

Federal Privacy Notice

The Federal Privacy Act requires the Missouri Department of Revenue (Department) to inform taxpayers of the Department's legal authority for requesting identifying information, including social security numbers, and to explain why the information is needed and how the information will be used.

Chapter 143 of the Missouri Revised Statutes authorizes the Department to request information necessary to carry out the tax laws of the state of Missouri. Federal law 42 U.S.C. Section 405 (c)(2)(C) authorizes the states to require taxpayers to provide social security numbers.

The Department uses your social security number to identify you and process your tax returns and other documents, to determine and collect the correct amount of tax, to ensure you are complying with the tax laws, and to exchange tax information with the Internal Revenue Service, other states, and the Multistate Tax Commission (Chapters 32 and 143, RSMo). In addition, statutorily provided non-tax uses are: (1) to provide information to the Department of Higher Education with respect to applicants for financial assistance under Chapter 173, RSMo and (2) to offset refunds against amounts due to a state agency by a person or entity (Chapter 143, RSMo). Information furnished to other agencies or persons shall be used solely for the purpose of administering tax laws or the specific laws administered by the person having the statutory right to obtain it [as indicated above]. In addition, information may be disclosed to the public regarding the name of a tax credit recipient and the amount issued to such recipient (Chapter 135, RSMo). (For the Department's authority to prescribe forms and to require furnishing of social security numbers, see Chapters 135, 143, and 144, RSMo.)

You are required to provide your social security number on your tax return. Failure to provide your social security number or providing a false social security number may result in criminal action against you.

Payment Voucher (Form MO	-1040\	<u>V)</u>	1
Please print. Make check payable to Missouri Departme MO-1040V and payment to the Missouri Department of Jefferson City, MO 65105-0371.			5
Name] 5
Spouse's Name			1
Street Address			1
City	State	ZIP Code	
Full payment of taxes must be submitted by April 15, 2 additions to tax for failure to pay. If you pay by check, you			- 1

of Revenue to process the check electronically. Any returned check may be presented

Social Security					
Number			'	-	
Name Control					
Spouse's Social				1 1	
Security Number				-	
Spouse's Name	Control				
Amount of Payr	nent	_			
(U.S. funds only)		\$			
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	19	934	7010001	•	
		Г			
Depar	tment Use Only				
Боран		_			
Denar	tment Use Only				
Depai	inchi ose only			_	

Form MO-1040V (Revised 12-2019)

A. Enter amount from Line 10 here	B. Enter amount from Line 13 here

2019 Property Tax Credit Chart

Amount from Line B above or from Form MO-PTS, Line 13 - Total Real Estate Tax Paid

			F	ROM —				FRC)M				— FRON	1 ———	
		1076	1051	1026	1001	976	951	926	901	876	851	826	801	776	751
				ТО				T(5 —				TO-		
		1100	1075	1050	1025	1000	975	950	925	900	875	850	825	800	775
FROM	ТО	Refund								id, not to					
1	14,300									s, you ar					
14,301	14,600	1078	1053	1028	1003	978	953	928	903	878	853	828	803	778	753
14,601	14,900	1069	1044	1019	994	969	944	919	894	869	844	819	794	769	744
14,901	15,200	1059	1034	1009	984	959	934	909	884	859	834	809	784	759	734
15,201		1049	1024	999	974	949	924	899	874	849	824	799	774	749	724
15,501	15,800	1039	1014	989	964	939	914	889	864	839	814	789	764	739	714
15,801 16,101	16,100 16,400	1028 1016	1003 991	978 966	953 941	928 916	903 891	878 866	853 841	828 816	803 791	778 766	753 741	728 716	703 691
16,401		1005	980	955	930	905	880	855	830	805	780	755	730	705	680
16,701		993	968	943	918	893	868	843	818	793	768	743	718	693	668
17,001		980	955	930	905	880	855	830	805	780	755	730	705	680	655
17,301	17,600	968	943	918	893	868	843	818	793	768	743	718	693	668	643
17,601	17,900	954	929	904	879	854	829	804	779	754	729	704	679	654	629
17,901	18,200	941	916	891	866	841	816	791	766	741	716	691	666	641	616
18,201		927	902	877	852	827	802	777	752	727	702	677	652	627	602
18,501	18,800	913	888	863	838	813	788	763	738	713	688	663	638	613	588
18,801	19,100	898 883	873 858	848 833	823 808	798 783	773 758	748 733	723 708	698 683	673 658	648 633	623 608	598 583	573 558
19,101 19,401	19,400 19,700	868	843	818	793	768	743	718	693	668	643	618	593	568	543
19,701		852	827	802	777	752	727	702	677	652	627	602	577	552	527
	20,300	836	811	786	761	736	711	686	661	636	611	586	561	536	511
	20,600	819	794	769	744	719	694	669	644	619	594	569	544	519	494
	20,900	802	777	752	727	702	677	652	627	602	577	552	527	502	477
20,901	21,200	785	760	735	710	685	660	635	610	585	560	535	510	485	460
21,201		767	742	717	692	667	642	617	592	567	542	517	492	467	442
21,501	21,800	749	724	699	674	649	624	599	574	549	524	499	474	449	424
21,801		731	706	681	656	631	606	581	556	531	506	481	456	431	406
22,101 22,401		712 693	687 668	662 643	637 618	612 593	587 568	562 543	537 518	512 493	487 468	462 443	437 418	412 393	387 368
22,401		673	648	623	598	573	548	523	498	473	448	423	398	373	348
23,001		653	628	603	578	553	528	503	478	453	428	403	378	353	328
23,301		633	608	583	558	533	508	483	458	433	408	383	358	333	308
23,601		613	588	563	538	513	488	463	438	413	388	363	338	313	288
23,901	24,200	591	566	541	516	491	466	441	416	391	366	341	316	291	266
	24,500	570	545	520	495	470	445	420	395	370	345	320	295	270	245
	24,800	548	523	498	473	448	423	398	373	348	323	298	273	248	223
	25,100 25,400	526	501	476	451	426 404	401	376	351	326	301	276	251 229	226 204	201
	25,400	504 481	479 456	454 431	429 406	381	379 356	354 331	329 306	304 281	279 256	254 231	206	181	179 156
	26,000	457	430	407	382	357	332	307	282	257	232	207	182	157	132
	26,300	434	409	384	359	334	309	284	259	234	209	184	159	134	109
	26,600	410	385	360	335	310	285	260	235	210	185	160	135	110	85
26,601	26,900	385	360	335	310	285	260	235	210	185	160	135	110	85	60
	27,200	361	336	311	286	261	236	211	186	161	136	111	86	61	36
	27,500	335	310	285	260	235	210	185	160	135	110	85	60	35	10
	27,800	310	285	260	235	210	185	160	135	110	85	60	35	10	
	28,100 28,400	284 258	259 233	234 208	209 183	184 158	159 133	134 108	109 83	84 58	59 33	34 8	9		
	28,400	231	206	181	156	131	106	81	56	31	6	0			
	29,000	204	179	154	129	104	79	54	29	4	9				
	29,300	177	152	127	102	77	52	27	2	·					
	29,600	149	124	99	74	49	24								
29,601	29,900	121	96	71	46	21									
29,901	30,000	95	70	45	20										

C. Find where these two numbers "meet" below to figure your credit amount. Enter on Form MO-PTS, Line 14.

A. Enter	amount from Line	10 here	 	B. Enter	amount from	Line 13	here	 	

Amount from Line B above or from Form MO-PTS, Line 13 - Total Real Estate Tax or 20 percent of Rent Paid

			F	ROM —				FRO)M	FROM —						
		726	726 701 676 651 626 601 576 551							526	501	476	451	426	401	
										320	301	470		420	401	
				то —				T			I		TO-	l		
		750	725	700	675	650	625	600	575	550	525	500	475	450	425	
FROM	ТО	Refund	is the actu	ual total ar	nount of a	llowable i	eal estate	tax paid, ı	not to exce	eed \$1,100	or rent c	redit equiv	alent not	to exceed	\$750	
1	14,300	(Form I	MO-PTS, L	ine 13). No	te: If you	rent from	a facility tl	hat does n	ot pay pro	perty tax	es, you ar	e not eligib	ole for a Pr	operty Ta	x Credit.	
14,301	14,600	728	703	678	653	628	603	578	553	528	503	478	453	428	403	
14,601		719	694	669	644	619	594	569	544	519	494	469	444	419	394	
14,901		709	684	659	634	609	584	559	534	509	484	459	434	409	384	
15,201		699	674	649	624	599	574	549	524	499	474	449	424	399	374	
15,501	15,800	689	664	639	614	589	564	539	514	489	464	439	414	389	364	
15,801		678	653	628	603	578	553	528	503	478	453	428	403	378	353	
16,101	16,400	666	641	616	591	566	541	516	491	466	441	416	391	366	341	
16,401		655	630	605	580	555	530	505	480	455	430	405	380	355	330	
16,701		643	618	593	568	543	518	493	468	443	418	393	368	343	318	
17,001		630	605	580	555	530	505	480	455	430	405	380	355	330	305	
17,301		618	593	568	543	518	493	468	443	418	393	368	343	318	293	
17,501		604	579	554	529	504	479	454	429	404	379	354	329	304	279	
17,901		591	566	541	516	491	466	441	416	391	366	341	316	291	266	
18,201		577	552	527	502	477	452	427	402	377	352	327	302	277	252	
18,501		563	538	513	488	463	438	413	388	363	338	313	288	263	238	
18,801		548	523	498	473	448	423	398	373	348	323	298	273	248	223	
19,101	19,400	533	508	483	458	433	408	383	358	333	308	283	258	233	208	
19,401		518	493	468	443	418	393	368	343	318	293	268	243	218	193	
19,701		502	477	452	427	402	377	352	327	302	277	252	227	202	177	
	20,300	486	461	436	411	386	361	336	311	286	261	236	211	186	161	
	20,600	469	444	419	394	369	344	319	294	269	244	219	194	169	144	
	20,900	452	427	402	377	352	327	302	277	252	227	202	177	152	127	
20,901		435	410	385	360	335	310	285	260	235	210	185	160	135	110	
21,201		417	392	367	342	317	292	267	242	217	192	167	142	117	92	
21,501		399	374	349	324	299	274	249	224	199	174	149	124	99	74	
21,801		381	356	331	306	281	256	231	206	181	156	131	106	81	56	
22,101		362	337	312	287	262	237	212	187	162	137	112	87	62	37	
22,401	-	343	318	293	268	243	218	193	168	143	118	93	68	43	18	
	23,000	323	298	273	248	223	198	173	148	123	98	73	48	23	10	
	23,300	303	278	253	228	203	178	153	128	103	78	53	28	3		
	23,600	283	258	233	208	183	158	133	108	83	58	33	8			
	23,900	263	238	213	188	163	138	113	88	63	38	13				
	24,200	241	216	191	166	141	116	91	66	41	16	10				
	24,500	220	195	170	145	120	95	70	45	20	10					
	24,800	198	173	148	123	98	73	48	23		1					
	25,100	176	151	126	101	76	51	26	1			\				
	25,400	154	129	104	79	54	29	4	·							
	25,700	131	106	81	56	31	6	·								
	26,000	107	82	57	32	7										
	26,300	84	59	34	9	,					Fx	ample	٥.			
	26,600	60	35	10	_							ine 10		2000 -	hall	
	26,900	35	10													
	27,200	11			_					٦ .		ne 13 o			15	
	27,500											\$525, t				
	27,800										cre	edit wa	ould be	e \$16.		
	28,100					This -	i	diast	00 10 -							
	28,400					i ms a	rea in	uicate	es no							
	28,700					crec	dit is a	llowa	ble.							
	29,000															
	29,300															
	29,600															
	29,900															
	30,000															
	, , - ,															

C. Find where these two numbers "meet" below to figure your credit amount. Enter on Form MO-PTS, Line 14.

A. Enter amount from Line 10 here	B. Enter amount from Line 13 here
C. Find where these two numbers "meet" below	y to figure your credit amount. Enter on Form MO-PTS. Line 14

Amount from Line B above or from Form MO-PTS, Line 13 - Total Real Estate Tax or 20% of Rent Paid

		FROM —						FROM—					FROM —				
		376	351	326	301	276	251	226	201	176	151	126	101	76	51	26	1
				— то -								l		 _TO			
		400	375	350	325	300	275	250	225	200	175	150	125	100	75	50	25
EDOM																	
FROM	TO		Refund is the actual total amount of allowable real estate tax paid, not to exceed \$1,100 or rent credit equivalent not to exceed \$75 (Form MO-PTS, Line 13). Note: If you rent from a facility that does not pay property taxes, you are not eligible for a Property Tax Credit equivalent not to exceed \$75 (Form MO-PTS, Line 13). Note: If you rent from a facility that does not pay property taxes, you are not eligible for a Property Tax Credit equivalent not to exceed \$1,100 or rent credit equivalent not to exceed \$75 (Form MO-PTS, Line 13). Note: If you rent from a facility that does not pay property taxes, you are not eligible for a Property Tax Credit equivalent not to exceed \$1,100 or rent credit equivalent not exceed \$1,100 or rent credit equiv														
1 14 701	14,300																_
14,301		378	353 344	328 319	303 294	278 269	253 244	228 219	203 194	178 169	153	128 119	103 94	78 69	53 44	28 19	3
14,601 14,901		369 359	334	309	284	259	234	209	184	159	144 134	109	84	59	34	9	
15,201		349	324	299	274	249	224	199	174	149	124	99	74	49	24	9	
15,501		339	314	289	264	239	214	189	164	139	114	89	64	39	14		
15,801		328	303	278	253	228	203	178	153	128	103	78	53	28	3		
16,101		316	291	266	241	216	191	166	141	116	91	66	41	16			
16,401		305	280	255	230	205	180	155	130	105	80	55	30	5			
16,701		293	268	243	218	193	168	143	118	93	68	43	18				
17,001		280	255	230	205	180	155	130	105	80	55	30	5				
17,301	17,600	268	243	218	193	168	143	118	93	68	43	18					
17,601	17,900	254	229	204	179	154	129	104	79	54	29	4					
17,901		241	216	191	166	141	116	91	66	41	16						
18,201		227	202	177	152	127	102	77	52	27	2						
18,501		213	188	163	138	113	88	63	38	13							
18,801		198	173	148	123	98	73	48	23								
19,101		183	158	133	108	83	58	33	8								
19,401		168	143	118	93	68	43	18	-								
19,701		152	127	102	77	52	27	2	\								
	20,300	136	111	86	61	36	11										
	20,600	119	94	69	44	19											
20,801	20,900	102 85	77 60	52 35	27 10	2											
21,201		67	42	17	10							ala:					
21,501		49	24	17			Example:										
21,801		31	6						If Line 10 is \$19,360 and								
22,101		12							Line 13 of Form MO-PTS								
22,401									is \$225, then the tax								
22,701	23,000								credit would be \$8.								
23,001																	
	23,600																
	23,900																
23,901																	
	24,500																
	24,800																
	25,100 25,400																
	25,400																
	26,000																
	26,300																
	26,600																
	26,900						_	hic a	rea ir	dica	toc n	_					
26,901	27,200						'										
27,201	27,500							cred	it is a	allow	able.						
27,501	27,800																
	28,100																
	28,400																
	28,700																
	29,000																
	29,300																
	29,600																
	29,900																
29,901	30,000																

PRSRT STD U.S. POSTAGE PAID Missouri Dept. of Revenue

Visit our website at

In addition to electronic filing information found on our website, you can:

- Use our fill-in forms that automatically calculate
- Download Missouri and federal tax forms
- Get answers to frequently asked questions
- Pay your taxes online
- Get the status of your refund or balance due
- Get a copy of the Taxpayer Bill of Rights

Important Phone Numbers

Individuals with speech or hearing impairments may use TTY (800) 735-2966 or fax (573) 522-1762.

Missouri Return Tracker

https://dor.mo.gov/returnstatus

Return Status Available for 2018 and 2019 Tax Returns