# MISSOURI

# **Form MO-1040**

Individual Income Tax Long Form



## File Electronically

Electronic filing is fast and easy. Last year, 84 percent of Missouri Individual Income Tax Returns were filed electronically. See page 2 for details about how you can file electronically this year.

Tax Deadline is April 17. See page 4 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:

- 1) 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 <a href="http://dor.mo.gov/personal/individual/">http://dor.mo.gov/personal/individual/</a>.
- 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 <a href="http://dor.mo.gov/personal/individual/">http://dor.mo.gov/personal/individual/</a>.

## **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 around 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 http://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.

**2-D 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 calculate and have 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

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#### Do You Have the Correct Tax 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:

- You or your spouse claim or file:
  - a. a pension or social security/social security disability or 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 and 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);
  - c. 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. a deduction for dependent(s) age 65 or older;
- f. an amended return;
- g. a nonresident entertainer or a professional athlete;
- h. a fiscal year return;
- i. a nonresident military service member stationed in Missouri and you or your spouse earned non-military income while in Missouri:
- j. a deduction for other federal tax (from Federal Form 1040, Lines 45, 46, 48, 59, 60b, and any recapture taxes on Line 63);

- k. a Health Care Sharing Ministry deduction;
- I. any military income earned while on active duty;
- m. the Bring Jobs Home tax deduction; or
- n. the Transportation Facilities deduction.
- 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 Higher Education Deposit Program, or other qualified 529 plan;
  - c. 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 Higher 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 carryback/carryforward;
  - k. combat pay included in federal adjusted gross income;
  - I. agriculture disaster relief income; or
- m. Employee Stock Ownership Plan (ESOP).
- You owe a penalty for underpayment of estimated tax.
- You owe tax on a lump sum distribution included on Federal Form 1040, Line 44.
- You owe recapture tax on low income housing credit.

#### **To Obtain Forms:**

Visit our website at <a href="http://dor.mo.gov/personal/individual/">http://dor.mo.gov/personal/individual/</a> to use the Department's form selector to obtain specific tax forms.

#### **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:

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

**Note:** If you are not required to file a Missouri return, but you received a 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 17, 2018**. 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, Application for Extension of Time to File. An automatic extension of time to file will be granted until October 15, 2018.

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 federal extension (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 <a href="http://dor.mo.gov/personal/individual/">http://dor.mo.gov/personal/individual/</a>.

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 <a href="http://dor.mo.gov/personal/individual/">http://dor.mo.gov/personal/individual/</a> 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.

2-D 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 <a href="http://dor.mo.gov/forms">http://dor.mo.gov/forms</a> for complete filing instructions. **Note: The tax rate for a composite return is 6 percent.** 

#### Fill-in Forms That Calculate

Visit <a href="http://dor.mo.gov/personal/individual/">http://dor.mo.gov/personal/individual/</a> to enter your tax information and let us do the math for you. No calculation errors means faster processing. Just 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 <a href="http://dor.mo.gov/personal/individual/">http://dor.mo.gov/personal/individual/</a> or call our automated individual income tax inquiry line at (573) 526-8299. To obtain the status of your return, 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.

#### Resident

A resident is an individual who either 1) maintained a domicile in Missouri or 2) 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 Federal Form 1040NR, Line 36 or Federal Form 1040NR-EZ, Line 10.

#### **Filing Status**

If you selected Box 1 or 2 on the Federal Form 1040NR; or Box 1 on Federal Form 1040NR-EZ, select Box A on Form MO-1040.

If you selected Box 3, 4, or 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 Box D on Form MO-1040.

If you selected Box 3, 4, or 5 and claimed your spouse as an exemption on Federal Form 1040NR, select Box E on Form MO-1040.

If you selected Box 6 on Federal Form 1040NR, select Box G 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 <a href="http://dor.mo.gov/personal/individual/">http://dor.mo.gov/personal/individual/</a> for more detailed information and Frequently Asked Questions.

#### **Federal Tax Deduction**

Enter on Form MO-1040, Line 11 the amount from Federal Form 1040NR, Line 53 minus Line 43, 44, 65, and any amount from Form 8885 included in Line 69; or the amount from Federal Form 1040NR-EZ, Line 15.

Enter on Form MO-1040, Line 12 the amount from Federal Form 1040NR, Lines 43, 44, 46, 57, and 59b.

For all other lines of Form MO-1040, see instructions starting 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 Form MO-NRI to determine their income percentage 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 service-members' 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 20 instructions for more information.

**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) - If you: (a) 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, you are considered a *nonresident* for tax purposes and your military pay, interest, and 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 of 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 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 <a href="http://dor.mo.gov/personal/individual/">http://dor.mo.gov/personal/individual/</a>.

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 2017 state income tax return, 2017 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 <a href="http://dor.mo.gov/personal/individual/">http://dor.mo.gov/personal/individual/</a>.

#### **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 28 of the return are computed as if you are a full-year resident. Tax (Line 28) is computed on all your income, and may then be reduced by a resident credit (Line 29), or by a Missouri income percentage (Line 30). The result is a prorated Missouri tax liability (Line 31) based only on the income earned in Missouri. See page 9, Lines 29 and 30.

#### **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 <a href="http://dor.mo.gov/personal/individual/">http://dor.mo.gov/personal/individual/</a> 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 <a href="http://dor.mo.gov/personal/individual/">http://dor.mo.gov/personal/individual/</a>.

#### 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 purchases 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), located on page 47. The due date for Form 4340 is April 16, 2018.

## **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.

### **Information to Complete Form MO-1040**

### Name, Address, Etc.

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

If the taxpayer or spouse died in 2017, select the appropriate box and write the date of death after the decedent's first name in the name and address area of the return. If a refund is due to the deceased taxpayer, attach a copy of Federal Form 1310 and death certificate.

#### Age 62 Through 64

If you or your spouse were ages **62**, **63**, **or 64 by December 31**, **2017**, 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 2017 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 for 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 <a href="http://dor.mo.gov/personal">http://dor.mo.gov/personal</a> to learn more about the property tax credit claim.

#### **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.

#### **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 (pages 1 and 2).

Federal Form	Line
Federal Form 1040	Line 37
Federal Form 1040A	Line 21
Federal Form 1040EZ	Line 4
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 14 and 42.

#### **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 17.

#### 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 Forms W-2 and 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 2016 Missouri tax withheld, less each spouse's 2016 tax liability. The result should be each spouse's portion of the 2016 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 1040EZ Line No.	Federal Form 1040A Line No.	Federal Form 1040 Line No.	Y - Yourself		S - Spouse
1. Wages, salaries, tips, etc	1	7	7	00	1	00
2. Taxable interest income	2	8a	8a	00	2	00
3. Dividend income	none	9a	9a	00	3	00
4. State and local income tax refunds	none	none	10	00	4	00
5. Alimony received	none	none	11	00	5	00
6. Business income or (loss)	none	none	12	00	6	00
7. Capital gain or (loss)	none	10	13	00	7	00
8. Other gains or (losses)	none	none	14	00	8	00
9. Taxable IRA distributions	none	11b	15b	00	9	00
10. Taxable pensions and annuities	none	12b	16b	00	10	00
11. Rents, royalties, partnerships, S corporations, trusts, etc	none	none	17	00	11	00
12. Farm income or (loss)	none	none	18	00	12	00
13. Unemployment compensation	3	13	19	00	13	00
14. Taxable social security benefits	none	14b	20b	00	14	00
15. Other income	none	none	21	00	15	00
16. Total (add Lines 1 through 15)	4	15	22	00	16	00
17. Less: federal adjustments to income	none	20	36	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.	4	21	37	00	18	00

#### **Line 7 - Income Percentages**

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

<u>Yourself</u>	Line 5Y	divided by	
<u>Spouse</u>	Line 6 Line 5S Line 6	= divided by =	

The total entered on Line 7 must equal 100 percent - round to the nearest percentage. (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 (example: 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), Forms 1099-R, W-2P, and SSA-1099.** 

#### Line 9 - Filing Status and Exemption Amount

Enter on Line 9 the amount of exemption claimed for your filing status. You must use the same filing status as on your Federal Form 1040 with two exceptions:

- Box B must be selected if you are claimed as a dependent on another person's federal tax return and you selected either box on Federal Form 1040EZ, Line 5; or you were not allowed to select Box 6a on Federal Forms 1040 or 1040A. If you selected Box B, enter "0".
- 2. **Box E** may be selected **only if** all of the following apply: a) you selected Box 3 (married filing separate return) on your Federal Form 1040 or 1040A; b) your spouse had no income and is not required to file a federal return; and c) your spouse was claimed as an exemption on your federal return and was not a dependent of someone else. **Attach a copy of your federal return. Only one box may be selected on Line 9, Boxes A through G.**

#### **Line 10 - Additional Personal Exemption**

If your Missouri adjusted gross income (MO-1040, Line 5Y or 5S) is less than \$20,000 and you claimed a personal exemption on Line 9, you qualify for an additional personal exemption of \$500. Enter \$500 on Line 10 for each qualifying spouse.

**Note**: If you selected Box B (claimed as a dependent on another person's federal tax return) on Line 9, you do not qualify for this exemption.

#### **Line 11 - Tax From Federal Return**

Use the chart on page 8 to locate your tax on your federal return. Do not enter your federal income tax withheld as shown on your Forms 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 "0". If you used a method other than the federal tax table to determine your federal tax, attach the appropriate schedule.

Federal Form	Line Numbers
1040	Line 56 minus Lines 45, 46, 66a, 68, 69, and any amount from Form 8885 on Line 73.
	and any amount from Form 8885 on Line 73.
1040A	Line 37 minus Lines 29, 42a, 44, 45, and any
	alternative minimum tax included on Line 28.
1040EZ	Line 10 minus Line 8a.
1040X	Line 8 minus Lines 14 and 15, except amounts from Forms 2439 and 4136.

Note: At the time the Department printed their tax booklets, the Internal Revenue Service had not finalized the 2017 federal income tax forms.

#### Line 12 - Other Federal Tax

Enter the total amount of Lines 45, 46, 48, 59, 60b, and any recapture taxes included on Line 63 of Federal Form 1040. Enter the total amount of any alternative minimum tax included on Line 28 plus Line 29 of Federal Form 1040A. 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). Attach a copy of Federal Forms 4255, 8611, or 8828 if claiming recapture taxes.

#### **Line 14 - Federal Income Tax Deduction**

If you selected Box A, B, D, E, F, or G on Line 9, your federal tax deduction may not exceed \$5,000. If you selected Box C on Line 9, your federal tax deduction may not exceed \$10,000.

#### **Line 15 - Standard or Itemized Deductions**

<u>Standard Deductions</u>: 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 15.

Use the chart below 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	Line Numbers
1040	Line 40	1040EZ	See following note
1040A	Line 24	1040X	Line 2

**Note:** If you filed a Federal Form 1040EZ, and selected one or both boxes on Line 5, refer to the Federal Standard Deduction Worksheet for Dependents. If you did not select either box on Federal Form 1040EZ, Line 5, enter \$6,350 if single or \$12,700 if married.

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.

#### **Lines 16 and 17 - Total Number of Dependents**

Do not include yourself or your spouse as dependents.

<u>Line 16</u> - Multiply by \$1,200 the total number of dependents you claimed on Line 6c of your federal return. You may claim a stillborn dependent deduction that occurred during the 2017 tax year. Select the box on Line 16, and include it in the total number of dependents. Attach a copy of the stillbirth certificate.

<u>Line 17</u> - Multiply by \$1,000 the total number of dependents you claimed on Line 16 that were age 65 or older by the last day of the taxable year. **Do not include dependents that receive state funding or Medicaid.** Attach a copy of your federal return (pages 1 and 2).

#### **Line 18 - Long-Term Care Insurance Deduction**

If you paid premiums for qualified long-term care insurance in 2017, 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 below 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.

<b>Worksheet for Long-Term Care Insurance Deduction</b>
A. Enter the amount paid for qualified
long-term care insurance policyA) \$
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
Schedule A, Line 4
C. Enter the amount from Federal
Schedule A, Line 1
D.Enter the amount of qualified
long-term care included on Line C D) \$
E. Subtract Line D from Line C
F. Subtract Line E from Line B.
If amount is less than zero, enter "0". F) \$
G.Subtract Line F from Line A
H.Enter Line G (or Line A if you did not
have to complete Lines B through G)
on Form MO-1040, Line 18.
Attach a copy of your Federal Form 1040 (pages 1 and 2) and Federal Schedule A (if you itemized your deductions).

#### **Line 19 - Health Care Sharing Ministry**

If you made contributions to a qualifying health care sharing ministry, enter the amounts you paid in 2017 on Line 19. **Do not** include amounts excluded from your federal taxable income.

#### **Line 20 - 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 a copy of your Leave and Earnings Statement which validates 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 21 - 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 <a href="http://ded.mo.gov">http://ded.mo.gov</a> or contact the Missouri Department of Economic Development at P.O. Box 118, Jefferson City, MO 65102-0118.

#### **Line 22 - 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 22. **Note**: The Qualified Trade Activities deduction cannot exceed 50 percent of the taxpayer's Missouri adjusted gross income.

#### Line 24 - Subtotal

Subtract Line 23 from Line 6. If less than zero, enter "0". **Do not enter a negative amount.** 

## **Line 26 - 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 26.

**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 attributed to a new business facility in a rural empowerment zone on Line 26.

Visit <a href="http://ded.mo.gov">http://ded.mo.gov</a> 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 28 - Missouri Tax

Calculate your tax by using your taxable income from Form MO-1040, Line 27Y and 27S, the Tax Rate Chart (page 20, Section A), and Tax Calculation Worksheet (page 20, Section B).

# **Lines 29 and 30 - 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 29 and 30. For more information and

examples, visit <a href="http://dor.mo.gov/personal/individual/">http://dor.mo.gov/personal/individual/</a>. Attach a copy of your other state or political subdivision's return.

#### **Line 29 - Missouri Resident(s)**

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

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

#### **Line 30 - Nonresident(s)**

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

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

The amount on Line 30 should be 100 percent unless you use Form MO-NRI and determine a lesser percentage. If you do not enter a percentage on Line 30, your tax will be based on all of your income, regardless of where it was earned.

#### **Line 29 or 30 - 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 32 - 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 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 2017. You must compute this tax by multiplying the amount shown as tax on a Lump Sum Distribution (Federal Form 4972) by 10 percent. For example, if your Federal Form 1040, Line 44 includes \$1,000 tax as a result of a Lump Sum Distribution (Federal Form 4972), the amount of tax on Form MO-1040, Line 32, would be \$100. Select the Lump Sum Distribution box on Line 32. 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 35 - Missouri Withholding**

Include only Missouri withholding as shown on your Forms 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 Forms W-2 and 1099. See Diagram 1, Form W-2, on page 20.

#### **Line 36 - Estimated Tax Payments**

Include any estimated tax payments made on your 2017 return and any overpayment applied from your 2016 Missouri return.

#### **Line 37 - 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 Forms MO-2NR and the Nonresident Partnership Form (Form MO-NRP). Attach Forms MO-2NR and MO-NRP.

#### **Line 38 - Nonresident Entertainer Tax Withholding**

Include your share of the payments from gross earnings as a nonresident entertainer, as shown on Forms 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 MO-2ENT.

#### Line 39 - Extension of Time to File

If you filed for an extension of time to file, enter on Line 39 the amount you paid to the Department of Revenue with Form MO-60.

#### **Line 40 - 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 40. Attach Form MO-TC, along with any applicable schedules, certificates, and federal forms. 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 36.

#### **Line 41 - 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 44-46.

#### **Line 43 - Amended Return Only: Payment on Original Return**

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

#### **Line 44 - 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.

- Box A 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 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.
- Box B Select Box B if you have a net operating loss carryback on your amended return. Indicate the year your loss occurred.

- Box C Select Box C if you have an investment tax credit carryback on your amended return. Indicate the year your credit occurred.
- Box D 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 46 - Overpayment**

If Line 42 is larger than Line 34, or on an amended return, Line 45 is larger than Line 34, enter the difference (overpayment) on Line 46. All or a portion of an overpayment can be refunded to you.

#### **Line 47 - Apply Overpayment to Next Year's Taxes**

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

#### **Line 48 - Trust Funds**

You may donate part or all of your overpaid amount or contribute additional payments to any of the nine 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:

> 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)

\$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 filing 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 served their country in an honorable manner. Contributions may be made at any

time directly to Missouri National Guard Trust Fund, ATTN: JFMO-J1/ 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: Office of Administration, 301 W. High St., Room 570, 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)

General Revenue Fund - Requests for information and contributions may be made at any time directly to General Revenue Fund, ATTN: Department of Revenue, P.O. Box 3022, Jefferson City, MO 65105-3022. (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 Health and Senior Services, Organ and Tissue Donor Program, P.O. Box 570, Jefferson City, MO 65102-0570, or call 888-497-4564.

#### **Additional Funds**

(Minimum contribution: \$2, or \$4 if married filing combined)

If you choose to give to additional funds, enter the two-digit additional fund code in the spaces provided on Line 48. 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/individual/. Donations received from the following funds are designated specifically for Missouri residents.

<u>Funds</u> <u>U</u>	Code:	<u>s</u>
American Cancer Society Heartland Division, Inc., Fund	01	
American Diabetes Association Gateway Area Fund	02	
American Heart Association Fund	03	
American Red Cross Trust Fund	15	
Amyotrophic Lateral Sclerosis (ALS - Lou Gehrig's Disease) Fund	05	
Arthritis Foundation Fund	09	
Developmental Disabilities Waiting List Equity Trust Fund	16	
Foster Care and Adoptive Parents Recruitment and Retention Fund	14	
March of Dimes Fund	08	
Missouri National Guard Foundation Fund	19	
Muscular Dystrophy Association Fund	07	
National Multiple Sclerosis Society Fund	10	
Pediatric Cancer Research Trust Fund	18	
Puppy Protection Trust Fund	1 <i>7</i>	
	_	



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 American Diabetes Association Gateway Area Diabetes Fund (02) – Requests for information may be made Care + Commitment 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)



American Red Cross Trust Fund (15) – For more information please contact your local American Red Cross at www.redcross.org or call 866-206-0256.

(Minimum contribution: \$1, or \$2 if married filing combined)



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)

Developmental Disabilities Waiting List Equity Trust Fund (16) -For more information please contact the Division of Developmental Disabilities at www.dmh.mo.gov/dd/ or call 1-800-207-9329. (Minimum contribution: \$1, or \$2 if married filing combined)

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 1-800-FIGHTMS, 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)

Children's Cancer

Cure Search' 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)



PUPPY Protection Trust Fund (17) - For more PROTECTION information, please contact the Puppy Protection Trust Fund at <a href="http://agriculture.mo.gov">http://agriculture.mo.gov</a> or call (573)

751-3076.(Minimum contribution: \$1, or \$2 if married filing combined)

#### Line 49 - Missouri 529 College Savings Plan Deposit

You can deposit all or a portion of your refund into a Missouri 529 College 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 Form 5632. For more information, see Missouri's 529 College Savings Plan Direct Deposit Form (Form 5632) at <a href="http://dor.mo.gov/forms">http://dor.mo.gov/forms</a>.

#### Line 50 - Refund

Subtract Lines 47, 48, and 49 from Line 46 and enter on Line 50. 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 52 - Underpayment of Estimated Tax Penalty**

If the total payments and credits amount on Line 42 less Line 39 or Line 45 less Line 39 is less than 90 percent (66-2/3 percent for farmers) of the amount on Line 34, 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 37-41. If you owe a penalty, enter the penalty amount on Line 52.

If you have an overpayment on Line 46, the Department of Revenue will reduce your overpayment by the amount of the penalty.

#### Line 53 - Amount Due

Payments must be postmarked by April 17, 2018, 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 <a href="http://dor.mo.gov/personal/individual/">http://dor.mo.gov/personal/individual/</a> 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 only visit our website at <a href="http://dor.mo.gov/personal/payonline.php">http://dor.mo.gov/personal/payonline.php</a> 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
\$100.01and 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 16 **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 - 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 NOL carries forward from the carryback year, enter the unused portion of your NOL as computed on Federal Form 1045, Schedule B, Line 10. Please attach Federal Form 1045, Schedules A and B, or the calculation of your NOL carryback/carryforward. 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.

**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 - Nonqualified Distribution** from a Qualified 529 Plan

Any distribution made by the Missouri Savings for Tuition Program (MOST), the 529 plan administered by the Missouri Higher Education Deposit Program, or any other qualified 529 plan, not used for qualified higher 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 9 of your Federal Schedule A, you must report that amount on Line 5 of Form MO-A, unless that state or political subdivision allows a subtraction to income for Missouri property taxes. Visit <a href="http://dor.mo.gov/faq/personal/nonresident.php">http://dor.mo.gov/faq/personal/nonresident.php</a> for a list of states that allow a subtraction for Missouri property taxes.

#### 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 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

X Expense | 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, Line 10). **Attach a copy of Federal Form 1040 (pages 1 and 2).** 

#### 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
servicemembers who are required to file a Missouri return may
subtract the military income received from their federal adjusted
gross income. Nonresident servicemembers' spouses who are in
Missouri due to military orders, and have declared another state
as their state of residence may subtract their income from their

- federal adjusted gross income. Attach a copy of the Form 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 exclusion to \$40,000, causing Box 1 of his

Form W-2 to indicate \$80,000. He is entitled to a subtraction

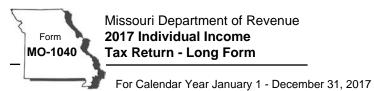
of \$30,000, which represents the portion of Box 1 of Form

W-2 attributable to combat pay that is included in his FAGI.

- 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 Form 1099-INT or any other applicable documentation.
- 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. Any amount of net operating loss 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 Federal Form 1045, Schedule A and B, and the calculation of your net operating loss carryback/carryforward.
- 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, Schedule A, Line 4, but paid for by the IMA 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 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. Attach a copy of your Federal Form 1040 (pages 1 and 2) and 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, Schedule D, and Federal 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 Schedule K-1.

Instructions continued on page 42



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Prin	t in BLACK ink only and DO NOT STAPLE.		
	Select Here for <b>Amended</b> Return		
	Select Here for <b>Composite</b> Return	Vendor Code De	partment Use Only
	(For use by S corporations or Partnerships)		Dartinent Ose Only
	ng a fiscal year return enter the beginning and ending dates here.  al Year Beginning (MM/DD/YY)  Fiscal Year Ending (MM/DD/YY)		
,	ect the appropriate boxes that apply, as of December 31, 2017.  Age 62 through 64  Age 65 or Older  Blind  urself  Spouse  Yourself  Spouse	100% Disabled  Yourself Spouse	Non-Obligated Spouse  Yourself Spouse Spouse
Name	Social Security Number in 2017 Spouse's  First Name M.I. Last Name  Spouse's First Name M.I. Spouse's Last Name  In Care Of Name (Attorney, Executor, Personal Representative, etc.)	s Social Security Number	Deceased in 2017  Suffix  Suffix
Address	Present Address (Include Apartment Number or Rural Route)  City, Town, or Post Office  County of Residence	State ZIP Code	

You may contribute to any one or all of the trust funds on Line 48. See pages 10-11 of the instructions for more trust fund information.



















17322010001

				Yourseif (Y	)	Sp	ouse (S)	
	1.	Federal adjusted gross income from your 2017 federal return (see worksheet on page 7 of the instructions)	1Y		. 00	18		00
		return (see worksneet on page 7 or the instructions)						
	2.	Total additions (from Form MO-A, Part 1, Line 7)	2Y		[00]	28		00
Σ	3.	Total income - Add Lines 1 and 2	3Y		. 00	38		00
3	4.	Total subtractions (from Form MO-A, Part 1, Line 17)	4Y		. 00	4S		00
	5.	Missouri adjusted gross income - Subtract Line 4 from Line 3	5Y		. 00	5S		00
	6	Total Missouri adjusted gross income - Add columns 5Y and 5S	S	6		. 00		
		Income percentages - Divide columns 5Y and 5S by total on			0/			0/
		Line 6. (Must equal 100%)	7Y		%	78		%
	8.	Pension, Social Security, Social Security Disability, and Military MO-A, Part 3, Section E)				8		00
		7, 1 att 0, 000tion 2)						
	9.	Select your filing status box below. Enter the appropriate exem	ption	amount on Line	9	9		00
		A. Single - \$2,100 (see Box B before selecting.)		E. Married Filir	ng Separate	(spouse NO	T filing) - \$4,20	00
		B. Claimed as a Dependent on Another Person's		F. Head of Hou	usehold - \$3	,500		
		Federal Tax Return - \$0.00					. 0	_
		C. Married Filing Combined (joint federal) - \$4,200		G. Qualifying V	Vidow(er) wi	th Depender	nt Child - \$3,50	00
		D. Married Filing Separate - \$2,100						
	10.	Additional personal exemption (see instructions on page 7)				10		00
actions	11.	Tax from federal return - <b>Do not enter federal income tax</b> withheld (see instructions on page 7 and 8)		11	. [	00		
ם הפת	12.	Other tax from federal return - Attach a copy of your federal return		12		00		
10 0		(pages 1 and 2)		[12]	L	<del>)</del> (0)		
2	13.	Total tax from federal return - Add Lines 11 and 12		13	. [	00		
	14	Federal tax deduction - Enter the amount from Line 13, not to e	xcee	d \$5 000 for an	individual			
		filer or \$10,000 for combined filers				14		00
	15.	Missouri standard deduction or itemized deductions.  • Single or Married Filing Separate - \$6,350  • Head of Household - \$9,350						
		<ul> <li>Married Filing Combined or Qualifying Widow(er) - \$12,700</li> </ul>						
		If age 65 or older, blind, claimed as a dependent, see page 8. If it	emizii	ng, see Form M	O-A, Part 2.	15		00
	16.	Number of dependents (from Federal Form 1040 or 1040A, Lin <b>Do not include yourself or spouse</b>			X \$1,200 =	= [16]		00
		Select box if claiming a stillborn child (see instruc	ctions	on page 8).				
	17	Number of dependents on Line 16 who are 65 years of age or ol	der o	nd do				
	17.	number of dependents on Line 16 who are 65 years of age of or			V \$1 000 -	_ 17		00

	18.	Long-term care insurance deduction		18	. 00
	19.	Health care sharing ministry deduction		19	. 00
(cont.)	20.	Military income deduction		20	. 00
ions (c	21.	Bring jobs home deduction	21	. 00	
Deductions	22.	Transportation facilities deduction		22	. 00
		A. Port Cargo Expansion B. International Trade Fa	ctivities		
ë					
<b>Exemptions and</b>	23.	Total deductions - Add Lines 8, 9, 10, and 14 through 22		23	. 00
ш					
		Subtotal - Subtract Line 23 from Line 6		24	. 00
	25.	Multiply Line 24 by appropriate percentages (%) on	25Y . 00	25\$	. 00
	20	Lines 7Y and 7S	[251]	200	. [00]
	∠6.	Enterprise zone or rural empowerment zone income modification	26Y . 00	26S	. 00
		modification			. [00]
	27.	Taxable income - Subtract Line 26 from Line 25	27Y . 00	27S	. 00
	28.	Tax (see tax chart on page 20 of the instructions)		28S	. 00
	29.	Resident credit - Attach Form MO-CR and other states'			
		income tax return(s)	29Y . 00	298	. 00
		· ,			
	30.	Missouri income percentage - Enter 100% unless you are			
		completing Form MO-NRI. Attach Form MO-NRI and a	30Y %	000	%
u		copy of your federal return if less than 100%	30Y %	30\$	70
Ĭ	0.4	Delegas Outstand Line 00 form Line 00: OD			
	31.	Balance - Subtract Line 29 from Line 28; OR	31Y   00	31S	. 00
		multiply Line 28 by percentage on Line 30		010	. [00]
	32.	Other taxes - Select box and attach federal form indicated.			
		Lump sum distribution (Form 4972)			
		Lump sum distribution (Form 4972)			
		Recapture of low income housing credit (Form 8611)	32Y	32S	. 00
		3,			
	33.	Subtotal - Add Lines 31 and 32	33Y . 00	338	. 00
	34.	Total Tax - Add Lines 33Y and 33S		34	. 00
S					
edit	35.	MISSOURI tax withheld - Attach Forms W-2 and 1099		35	. 00
ວັ					_
anc					
Payments and Credits	36.	2017 Missouri estimated tax payments - Include overpayment fro	om 2016 applied to 2017	36	. 00
aym	37.	Missouri tax payments for nonresident partners or S corporatio	n shareholders - Attach Forms		
ية	٠	MO-2NR and MO-NRP		37	. 00



edits	38.	Missouri tax payments for nonresident entertainers - Attach Form MO-2ENT	. 00
ğ	39.	Amount paid with Missouri extension of time to file (Form MO-60)	. 00
nts ar	40.	Miscellaneous tax credits (from Form MO-TC, Line 13) - Attach Form MO-TC	. 00
Payments and Credits	41.	Property tax credit - Attach Form MO-PTS 41	. 00
	42.	Total payments and credits - Add Lines 35 through 41	. 00
		tip Lines 43 through 45 if you are not filing an amended return.	
	43.	Amount paid on original return	00
	44.	Overpayment as shown (or adjusted) on original return	. 00
		Indicate Reason for Amending	
٤		Enter date of IRS report (MM/DD/YY)	
Retu		A. Federal audit	
Amended Return		Enter year of loss (YY)	
Ame		B. Net operating loss carryback	
		C. Investment tax credit carryback	
		D. Correction other than A, B, or C	
	45.	Amended return total payments and credits - Add Line 43 to Line 42 or subtract Line 44  from Line 42. 45	00
	46.	If Line 42, or if amended return, Line 45, is larger than Line 34, enter the difference.  Amount of OVERPAYMENT	. 00
	17	Amount of Line 46 to be applied to your 2018 estimated tax	. 00
	48.	Enter the amount of your donation in the trust fund boxes below. See instructions for additional trust fund codes.	
		Children's 48a. Trust Fund	
		40a. Irust Fund 40b. Irust Fund 40c. Irust Fund 40c. Irust Fund	
Refund		Missouri National Guard 48d. Trust Fund  New Yorkers' 48e. Memorial Fund  New Yorkers' 48f. Testing Fund  New Yorkers' 48f. Testing Fund  New Yorkers' 48f. Testing Fund	
ž			
		Missouri Military Family 48g. Relief Fund  48h. Revenue Fund  . 00  48i. Organ Donor Program Fund . 00	
		Additional Additional Additional Additional	
		48j. Code 48k. Code 48k. Code 48k. Code	
		Total Donation - Add amounts from Boxes 48a through 48k and enter here	. 00
	49	Amount of Line 46 to be deposited into a Missouri 529 College Savings Plan (MOST)	
		account. Enter amount from Line E of Form 5632	. 00



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# Reserved

	51.	If Line 34 is larger than Line 42 or Line Amount of UNDERPAYMENT (see th			51			00
Amount Due	52.	Underpayment of estimated tax penalt		-			[	00
Amo		Select this box if you are a farm	ner exempt from the underpayment	of estimated tax	penalty.			
	53.	<b>AMOUNT DUE</b> - Add Lines 51 and 52 If you pay by check, you authorize the electronically. Any returned check may	Department of Revenue to process		53		[	00
	bes info an	der penalties of perjury, I declare that I st of my knowledge and belief it is true ormation of which he or she has any knowledge individual who files a frivolous return. I fined under federal law and that I am not	e, correct, and complete. Declaration owledge. As provided in Chapter 143 also declare under penalties of per	on of preparer ( 3, RSMo, a pena jury that I emplo	other than to alty of up to \$ by no illegal o	axpayer) is b 6500 shall be i or unauthorize	ased on mposed	all I on
	Sigi	nature			Date (MM/DD	)/YY)		
	Spc	ouse's Signature (If filing combined, BOTH mi	ust sign)		Date (MM/DD	)/YY)		
_								
Signature	E-m	nail Address			Daytime Tele	phone		
Sign								
	Pre	eparer's Signature			Date (MM/DD	)/YY)		
	Pre	eparer's FEIN, SSN, or PTIN			Preparer's Te	elephone		
	Pre	parer's Address			State	ZIP Code		
		uthorize the Director of Revenue or deleany member of the preparer's firm	•			. 🗌 Yes		No
			Department Use Only					
	Α	☐ FA ☐ E10	☐ DE ☐ F					
Mai	l To	D: Balance Due: Missouri Department of Revenue P.O. Box 329 Jefferson City, MO 65107-0329	Refund or No Amount Due: Missouri Department of Revenue P.O. Box 500 Jefferson City, MO 65106-0500	Phone (Balance Phone (Refunder Fax: (573) 751- E-mail: income	d or No Amou 2195	751-7200 int Due): (573)	Revised 12-2	·

#### 2017 Tax Chart

To identify your tax, use your Missouri taxable income from Form MO-1040, Line 27Y or 27S 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 <a href="http://dor.mo.gov/personal/individual">http://dor.mo.gov/personal/individual</a> or by using the worksheet in Section B below. Round to the nearest whole dollar and enter on Form MO-1040, Line 28Y and 28S.

	Tax Rate Cha	rt
	If the Missouri taxable income is:	The tax is:
	\$0 to \$100	\$0
4	At least \$101 but not over \$1,008	11/2% of the Missouri taxable income
_	Over \$1,008 but not over \$2,016	\$15 plus 2% of excess over \$1,008
ō	Over \$2,016 but not over \$3,024	\$35 plus 21/2% of excess over \$2,016
ecti	Over \$3,024 but not over \$4,032	\$60 plus 3% of excess over \$3,024
	Over \$4,032 but not over \$5,040	\$90 plus 31/2% of excess over \$4,032
S	Over \$5,040 but not over \$6,048	\$125 plus 4% of excess over \$5,040
	Over \$6,048 but not over \$7,056	\$165 plus 41/2% of excess over \$6,048
	Over \$7,056 but not over \$8,064	\$210 plus 5% of excess over \$7,056
	Over \$8,064 but not over \$9,072	\$260 plus 51/2% of excess over \$8,064
	Over \$9,072	\$315 plus 6% of excess over \$9,072

	Tax Calcula	tion Works	heet			
		Yourself	Spouse	E	xample A	Example B
	1. Missouri taxable income (Form MO-1040, Line 27Y and 27S). \$			_ \$	3,090	\$ 12,000
	Enter the minimum taxable income for your tax bracket (see Section A above)			\$	3,024	\$9,072
n B	3. Difference - Subtract Line 2 from Line 1 = \$			_ = \$	66	\$ 2,928
Section	4. Enter the percent for your tax bracket (see Section A above)X		_%	_% X	3%	6%
S	5. Multiply Line 3 by the percent on Line 4 = \$			_ = \$	1.98	\$ 175.68
	6. Enter the tax from your tax bracket - before applying the percent (see Section A above) + \$			_ + \$	60	\$315
	7. Total Missouri Tax - Add Line 5 and 6. Enter here and on Form MO-1040, Line 28Y and 28S = \$	·		_ = \$		•
					(\$61.98 rounded to the nearest dollar)	(\$490.68 rounded to the nearest dollar)

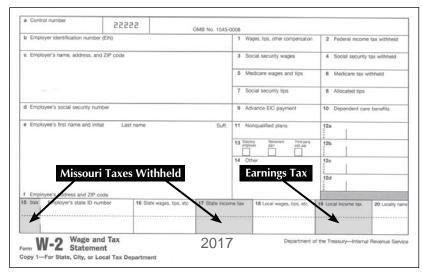




Diagram 1: Form W-2



# Missouri Department of Revenue **2017 Individual Income Tax Adjustments**

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.

	Soc	cial Security Number	Spouse's Social Security Number			
			-	-		
σ	Firs	st Name M.I. Last Name			Suffix	
Name						
_						
	Spo	puse's First Name M.I. Spouse's Last Name	me		Suffix	
		1.00				
	AC	Iditions	Yourself (Y)	Spous	se (S)	
	1.	Interest on state and local obligations other than Missouri source	1Y	00 15	. 00	
	•	— — — — — — — — — — — — — — — — — — —	-			
	2.	Partnership Fiduciary S Corporation				
		No Occasion Land (Occasion Land (Occasion))				
		Net Operating Loss (Carryback/Carryforward)				
ē		Other (description)	2Y .	00 28	. 00	
COM	3.	Nonqualified distribution received from a qualified 529 plan (higher	av.			
s In		education savings program) not used for qualified expenses	3Y .	00 38	. 00	
iros	4.	Food Pantry contributions included on Federal Schedule A	4Y	00 48	. 00	
ed (	••	Toda Tahay soliah bahara maladad ah Todasah Ganadalo Zili				
just	5.	Nonresident Property Tax	5Y .	00 58	. 00	
l Ad	6.	Nonqualified distribution received from a qualified Achieving a Better	6Y	00 6S	. 00	
dera	7.	Life Experience Program (ABLE) not used for qualified expenses Total Additions - Add Lines 1 through 6. Enter here and on Form			[00]	
Fe	٠.	MO-1040, Line 2	7Y .	00 78	. 00	
ns to	•					
- Missouri Modifications to Federal Adjusted Gross Income		Ibtractions				
Zi.Lici	8.	Interest from exempt federal obligations included in federal adjusted gross income - Attach a detailed list or all Federal Form(s) 1099	8Y	00 85	. 00	
Moo		gross modifie - Attach a detailed list of all 1 edetail of mi(s) 1000				
ouri	9.	Any state income tax refund included in federal adjusted gross income.	9Y .	00 98	. 00	
Niss	4.0			<i>c.</i>		
- 2	10.	Partnership Fiduciary S Corporation	Railroad Retirement B	enefits		
Part 1		Military (nonresident) Combat Pay Build A	merica and Recovery Zone Bon	nd Interest		
4						
		MO Public-Private Transportation Act	LOSS			
		Other (description)	10Y	00 108	. 00	
	11.	Exempt contributions made to a qualified 529 plan (higher education				
		savings program)	11Y .	00 118	. 00	
	12.	Qualified Health Insurance Premiums - Attach the Qualified Health				
		Insurance Premiums Worksheet (Form 5695) and supporting documentation	12Y	00 128	. 00	
		documentation				

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	13.	Missouri depreciation adjustment (Section 143.121, RSMo)				
			13Y	00	13S	00
Continued		Sold or disposed property previously taken as addition modification	131	. 00	130	. [00]
	14.	Home Energy Audit Expenses - Attach the Home Energy Audit	14Y	00	148	. 00
on	15	Expense (Form MO-HEA)				[00]
<u>၂</u>	15.	Experience Program (ABLE)	15Y	00	15S	. 00
Part 1		Experience Program (ABLE)				
Δ.	16.	Agriculture Disaster Relief	16Y	00	16S	. 00
		Total Subtractions - Add Lines 8 through 16. Enter here and on				
	17.	Form MO-1040, Line 4	17Y	00	17S	. 00
		1 OIIII MO-1040, Line 4				
	Cor	mplete this section only if you itemize deductions on your federal return. A	ttach your Federal Form 1040	(pages	s 1 and 2) and Federa	I Schedule A.
	1.	Total federal itemized deductions from Federal Form 1040, Line 40			. 1	. 00
		,				
	2.	2017 Social security tax - (Yourself)			. 2	. 00
		, ,				
2	3.	2017 Social security tax - (Spouse)			. 3	. 00
ţi						
- Missouri Itemized Deductions	4.	2017 Railroad retirement tax - Tier I and Tier II (Yourself)			4	[00]
Dec						
eq	5.	2017 Railroad retirement tax - Tier I and Tier II (Spouse)			5	[00]
m						
<u>t</u> e	6.	2017 Medicare tax - Yourself and Spouse (see instructions on page 42)	)		6	. 00
ğ					_	
iss	7.	2017 Self-employment tax (see instructions on page 42)			7	. 00
Ξ						
Part 2	8.	Total - Add Lines 1 through 7			8	. 00
Раг	9.	State and local income taxes from Federal Schedule A, Line 5 or see	9			
		the worksheet below	9	. 00		
			10	00		
	10.	Earnings taxes included in Line 9	10	. [00]		
	44	Net state income taxes - Subtract Line 10 from Line 9 or enter Line 8 fr	om workshoot holow		11	. 00
	11.	Net State income taxes - Subtract Line 10 from Line 9 of enter Line 8 fr	om worksneer below			
	12.	Missouri Itemized Deductions - Subtract Line 11 from Line 8. Enter here	e and on Form MO-1040 Line	15	12	. 00
	12.	Wissour Remized Deductions - Subtract Line 11 from Line 6. Line 11cm	c and on rominio-1040, Eme	, 10		
	Cor	mplete this worksheet only if your federal adjusted gross income from	n Federal Form 1040, Line 3	7 is m	ore than \$313,800 i	f married filing
	con	nbined or qualifying widow(er), \$287,650 if head of household, \$261,5	500 if single or claimed as a	depe	ndent, or \$156,900 i	f married filing
7	sep	parate. Attach your Federal Itemized Deduction Worksheet (page A-12 of	f Federal Schedule A instructi	ons).		
Ĭ.						
S,	1.	Enter amount from Federal Itemized Deduction Worksheet, Line 3 (see	page A-12 of Federal Sched	ule A		
ахе		instructions). If \$0 or less, enter "0"	· -		. 1	. 00
E T						
Ë	2.	Enter amount from Federal Itemized Deduction Worksheet, Line 9 (see	Federal Schedule A instruction	ons)	2	. 00
<u>=</u>						
ate	3.	State and local income taxes from Federal Form 1040, Schedule A, Lin	e 5		3	. 00
ţ						
Part 2 Worksheet - Net State Income Taxes, Line 11	4.	Earnings taxes included on Federal Form 1040, Schedule A, Line 5			4	. 00
et-					_	
she	5.	Subtract Line 4 from Line 3			5	. 00
ork.						0/
Š	6.	Divide Line 5 by Line 1			6	%
エ		Multiply Line 2 by Line 6			7	
_					1 / 1	. 00



8. Subtract Line 7 from Line 5. Enter here and on Form MO-A, Part 2, Line 11....

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

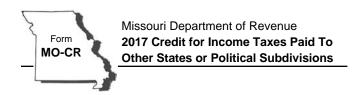
	Pu	ıblic Pension Calculation - Pensions received from any federal, s	state, or local government.		
	1.	Missouri adjusted gross income from Form MO-1040, Line 6		1	. 00
	2.	Taxable social security benefits from Federal Form 1040A, Line 14b or	2	. 00	
	3.	Subtract Line 2 from Line 1		3	. 00
	4.	Select 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	g Widow(er) - \$85,000	4	. 00
<b>4</b>	5.	Subtract Line 4 from Line 3 and enter on Line 5. If Line 4 is greater than	n Line 3, enter \$0	5	. 00
Section A	6.	Taxable pension for each spouse from public sources from Federal Form 1040A, Line 12b or 1040, Line 16b	6Y . 00	6S	. 00
	7.	Amount from Line 6 or \$37,089 (maximum social security benefit), whichever is less	7Y . 00	78	. 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	8Y . 00	88	. 00
	9.	Subtract Line 8 from Line 7. If Line 8 is greater than Line 7, enter \$0.	9Y . 00	98	. 00
	10.	Add amounts on Lines 9Y and 9S		10	. 00
	11.	Total public pension, subtract Line 5 from Line 10. If Line 5 is greater th	nan Line 10, enter \$0	11	. 00
	Pri	ivate Pension Calculation - Annuities, pensions, IRAs, and 401(k	x) plans funded by a private source	<b>).</b>	
	1.	Missouri adjusted gross income from Form MO-1040, Line 6		1	. 00
	2.	Taxable social security benefits from Federal Form 1040A, Line 14b or	2	. 00	
	3.	Subtract Line 2 from Line 1		3	. 00
	4.	Select the appropriate filing status and enter the amount on Line 4.  • Married Filing Combined (joint federal) - \$32,000			
Section B		<ul> <li>Single, Head of Household and Qualifying Widow(er) - \$25,000</li> <li>Married Filing Separate - \$16,000</li> </ul>		4	. 00
Se	5.	Subtract Line 4 from Line 3. If Line 4 is greater than Line 3, enter \$0		5	. 00
	6.	Taxable pension for each spouse from private sources from Federal Form 1040A, Lines 11b and 12b, or Federal Form 1040,	6Y . 00	6S	. 00
	_	Lines 15b and 16b	7Y . 00		. 00
	7.	Amounts from Line 6Y and 6S or \$6,000, whichever is less		8	. 00
	8.	Add Lines 7Y and 7S		9	00
	9	Total private pension, subtract Line 5 from Line 8. If Line 5 is greater the	an Line 8 enter \$0	9	1001



		ocial Security or Social Security Disability Calculation - To cember 31 and have selected the 62 and older box on page 1 of Form MC		=			
	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	. 2	. 00			
o u	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 Form 1040A, Line 14b or Federal Form 1040, Line 20b	4Y		00	48	. 00
	5.	Taxable social security disability benefits for each spouse from Federal Form 1040A, Line 14b or 1040, Line 20b	5Y		00	58	. 00
	6.	Amount from Line(s) 4Y or 5Y, and 4S or 5S	6Y	. [	00	68	. 00
	7.	Add Lines 6Y and 6S				7	. 00
	8.	Total social security/social security disability, subtract Line 3 from Line enter \$0		· ·	7, 	8	. 00
	2.4						
	IVI	ilitary Pension Calculation					
0	1.	Military retirement benefits included on Federal Form 1040A, Line 12b	or Fed	eral Form 1040, Line 16b			. 00
Section D	2.	Taxable public pension from Federal Form 1040A, Line 12b or Federal	Form	1040, Line 16b			. 00
Se	3.	Divide Line 1 by Line 2 (Round to whole number)				3	% □
	4.	Multiply Line 3 by Line 11 of Section A. If you are not claiming a public	pensic	on exemption, enter \$0		4	. 00
	5.	Total military pension, subtract Line 4 from Line 1				5	. 00
ш	To	otal Pension and Social Security/Social Security Disab	ility/l	Military Exemption			
Section E		d Line 11 (Section A), Line 9 (Section B), Line 8 (Section C), and Line 5 ter 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	e		Social Security Num	ber			
			_		-		
Spou	ise's Name		Spouse's Social Sec	urity N	umber		
			_				
			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 28Y and 28S). Use the two letter abbreviation for the state or name of political subdivision. See the table on back for the two letter	2Y		. 00	28		. 00
	abbreviation, or enter the name of the political subdivision below.		State of:			State of:	
3.	Wages and commissions	3Ү		. 00	3S		. 00
4.	Other income (Describe nature)	4Y		. 00	48		. 00
5.	Total - Add Lines 3 and 4	5Y		. 00	58		. 00
6.	Less, related adjustments (from Federal Form 1040A, Line 20, or Federal Form 1040, Line 36)	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		%	88		%
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	10S		. 00
11.	Credit - Enter the smaller amount of Line 9 or Line 10 here and on Form MO-1040, Line 29Y or Line 29S. 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



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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 28).
- 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 28Y and 28S.
- 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, Line 36
  - Federal Form 1040A, Line 20
  - 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 29Y and 29S. (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





Resident/Nonresident Status - Sel	ect your status in the approp	priate box b	elow.		
Social Security Number		Spouse's S	ocial Security Number		
				-	
Name		Spouse's N	ame		
Address		Address			
City, State, ZIP Code		City, State,	ZIP Code		
1. Nonresident of Missouri	1. Nonresident of Missouri				
State of residence during 2017	State of residence during 2017				
2. Part-Year Missouri Residen	ıt	2 Pa	art-Year Missouri Res	sident	
Indicate the dates you were a N				ere a Missouri Resident in 2017.	
A. Date From:	Date To:	Α.	Date From:	Date To:	
B. Indicate the other state of re	sidence	В.	Indicate the other state	e of residence	
and dates you resided there			and dates you resided	there	
Date From:	Date To:		Date From:	Date To:	
Based on the Military Spouse's Res because your spouse is there on milit complete Form MO-NRI. You must re	tary orders, and Missouri is your	state of resid		- · · · · · · · · · · · · · · · · · · ·	
3. Military/Nonresident Tax Sta			=	ax Status - Indicate your tax status C - Missouri Income Percentage.	
Missouri Home of Record			Missouri Home of Re	cord	
I did not at any time during	the 2017 tax year maintain a		I did not at any time de	uring the 2017 tax year maintain a	
	n Missouri, nor did I spend more			oode in Missouri, nor did I spend more	
	rring the year. I did maintain a			uri during the year. I did maintain a	
permanent place of abode i	n the state of		permanent place of at	oode in the state of	
Non-Missouri Home of Red	cord		Non-Missouri Home of	of Record	
I resided in Missouri during	2017 solely because my spouse		I resided in Missouri d	luring 2017 solely because my spouse	
or I was stationed at			or I was stationed at _		
on military orders. My home	e of record is in the state of		on military orders. My	home of record is in the state of	
·			·		



17314010001

,	Wor	ksheet for Missouri Source Income							
			Federal Form	Federal Form		Yourself or		Spouse (On A	
		Adjusted Gross	1040A,	1040,		One Income Filer		Combined Return	1)
		Income Computations	Line No.	Line No.		Missouri Sources		Missouri Sources	
		income computations				Wissouri Godices		WildSouth Cources	,
	Α.	Wages, salaries, tips, etc	7	7	Α	. 00	Α		. 00
	В.	Taxable interest income	8a	8a	В	. 00	В		00
	C.	Dividend income	9a	9a	С	. 00	С		00
	_		NONE	10	D	. 00	D		00
	D.	State and local income tax refunds	NONE	11	E	. 00	E		00
	Ε.	Alimony received	NONE	12	F	. 00	F		00
	F.	Business income or (loss)	10	13	G	. 00	G		00
	G.	Capital gain or (loss)	NONE	14	Н	. 00	Н		00
	Н.	Other gains or (losses).	11b	15b	i	. 00	1		00
В	l.	Taxable IRA distributions	12b	16b	J	. 00	J		00
Part	J.	Taxable pensions and annuities	NONE	17	K	. 00	K		00
ъ.	K.	Rents, royalties, partnerships, S corporations, etc	NONE	18	L	. 00	L		00
	L.	Farm income or (loss)	13		М	. 00	М		00
	М.	Unemployment compensation		19	N	. 00	N		00
	N.	Taxable social security benefits	14b	20b	0		0		00
	Ο.	Other income	NONE	21	Р	. 00	P		00
	Ρ.	Total - Add Lines A through O	15	22	Q	. 00	Q		00
	Q.	Less: federal adjustments to income	20	36	Q	. [00]	Q		. [00]
	R.	,	24	27	R	. 00	R		00
	_	income, enter this amount on Part C, Line 1	21	37		. [00]	K		. [00]
	S.	Missouri modifications - additions to federal adjusted gros			S	. 00	S		00
	_	(Missouri source from Form MO-1040, Line 2)			<u> </u>	. [00]	S		. [00]
	Т.	,	•		Т	. 00	Т		00
		(Missouri source from Form MO-1040, Line 4)					'		. [00]
	U.	MISSOURI INCOME (Missouri sources). Line R plus Line	•		U	. 00	U		00
		Line T. Enter this amount on Part C, Line 1							
	Miss	souri Income Percentage							
		· · · · · · · · · · · · · · · · · · ·			Υ	ourself or		Spouse	
					One	Income Filer	(On	A Combined Retur	n)
	1.	Missouri Income - Enter wages, salaries, etc. from Miss	ouri (You mus	t 🗆			ì		
	••	file a Missouri return if the amount on this line is more that	,	437		00   15	s		. 00
		ine a micesam retain it the amount on the inite to more the	4000)						-
ပ	2.	Taxpayer's total adjusted gross income (From Form MO-	1040. Lines 5Y	,					
Part C		and 5S or from your federal form if you are a military non	•						
Δ.		are not required to file a Missouri return)				. 00 2	S		. 00
		,							
	3.	Missouri Income Percentage - Divide Line 1 by Line 2.	If greater than						
		100%, enter 100%. (Round to a whole percent such as 9	1% instead of						
		90.5% and 90% instead of 90.4%. However, if percentag	e is less than						
		0.5%, use the exact percentage.) Enter percentage here	and on Form			0,			۰,
		MO-1040, Lines 30Y and 30S		3Y		% 3:	S		%
		der penalties of perjury, I declare that I have examined the				-			
		claration of preparer (other than taxpayer) is based on a			e nas	s any knowledge. As prov	ıded ı	n Chapter 143, RS	SIVIO,
ē	ар	enalty of up to \$500 shall be imposed on any individual	wno files a friv	olous return.					
atuı	Sig	nature				Date (MM/	DD/YY	<u> </u>	
Signature				<u> </u>					
S	C	avanta Cianatura (it filling apprehing a DOTIL mount of the				D-1- /8484/			
	Spo	ouse's Signature (if filing combined, BOTH must sign)				Date (MM/l	ען א/טע רועע	1	



#### 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 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 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 <a href="https://sa.dor.mo.gov/nri/">https://sa.dor.mo.gov/nri/</a>.

**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. 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.



-	Missouri Department of Revenue 2017 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	by to complete a home energy audit may deduct 100 percent of the costs of recommendations made by the auditor. The subtraction may not exceed returns. To qualify for the subtraction, you must have incurred expenses must not have been excluded from your federal adjusted gross income or
Instructions	In the spaces provided below:  • Report the name of the auditor who conducted the audit  • Report the auditor's certification number  • Summarize each of the auditor's recommendations  • Enter the amount paid for the audit on Line A  • Enter the total amount paid to implement the energy efficiency recommendations on Line B	<ul> <li>Enter the total amount paid for the audit and any implemented recommendations on Line C</li> <li>Attach applicable receipts</li> <li>Attach completed MO-HEA and receipts to Form MO-1040</li> </ul>
	Auditor Name	Auditor Certification Number
	Summary of Recommendations	
	1	
	2	
nmary	3	
Auditor Summary	4	
Audit	5	
	A. Amount paid for audit	
	B. Amount paid to implement recommendations	В
	C. Total Paid - Add Lines A and B and enter here	c



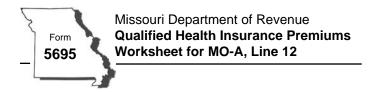
D

Е

00

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.  $\dots$ 



Social Security Number	oer	
_	_	
Spouse's Social Sec	urity 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 1040A, Line 14a, or Federal Form 10 Line 6 and enter your total health insurance premiums paid				1		. 00
2.	Enter amount from Federal Form 1040A, Line 14b or Federal Form 1040, L	Line 20b	)		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		. 00
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		%
0.	Enter the amount from Federal Schedule A, Line 1				10		. 00
1.	Enter the amount from Federal Schedule A, Line 4				11		. 00
2.	Divide Line 11 by Line 10 (round to full percent)				12		<b>%</b>
3.	Multiply Line 8 by percent on Line 12				13		. 00
4.	Subtract Line 13 from Line 8				14		. 00
5.	Enter your federal taxable income from Federal Form 1040A, Line 27, or F	ederal F	Form 1040, Line 43		15		. 00
6.	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 of				16		. 00
7.	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



## Missouri Department of Revenue Form 2017 Property Tax Credit Schedule

Department Use Only			
(MM/DD/YY)			

Soci	al Se	ecurity Number		Date of Birth (MM/DD/YYYY)
First	Nam	ne	M.I.	Last Name
Spo	use's	Social Security Number		Spouse's Date of Birth (MM/DD/YYYY)
Spo	use's	First Name	M.I.	Last Name
Filing Qualifications		C. 100% Disabled (Attach letter from Social Secur  D. 60 years of age or older and received surviving  Select only one filing status. If married filing combine  Single Married - Filing Combined	ar reside rvice (Att ity Admir spouse   d, you r	nt. (Attach Form SSA-1099.)  ach letter from Department of Veterans Affairs - see instructions.)  distration or Form SSA-1099.)  denefits (Attach Form SSA-1099.)  nust report both incomes.  Living Separate for Entire Year
		·		rill result in denial or delay of your claim:  signed landlord statement, Form(s) 1099, W-2, etc.
Income	<ol> <li>3.</li> <li>4.</li> </ol>	Enter the amount of income from Form MO-1040, Line Enter the amount of nontaxable social security benefiting minor children before any deductions and the amount retirement benefits. Attach Form(s) SSA-1099 or RR Enter the total amount of pensions, annuities, divider included in Line 1. Include tax exempt interest from MO-1040). Attach Forms W-2, 1099, 1099-R, 1099-R Enter the amount of railroad retirement benefits (not Attach Form RRB-1099-R (Tier II). If filing Form MO-	its receivent of social B-1099 ands, rental MO-A, Paral MISC, 10 and 1040, resident	ed by you, your spouse, and your ial security equivalent railroad [TIER I]
	5.	Enter the amount of veterans payments or benefits b <b>Attach</b> letter from Veterans Affairs (see instructions)		



	6.	Enter the total amount received by you, your spouse, and your <b>minor children</b> from: public assistance, SSI, child support, or Temporary Assistance payments (TA and TANF). <b>Attach</b> a letter from the Social Security Administration that includes the total amount of assistance received and Form 1099 from Employment Security, if applicable	6	0
	7.	Enter the amount of nonbusiness loss(es). You must include nonbusiness loss(es) in your household income (as a positive amount) here. (Include capital loss from Federal Form 1040, Line 13.)	7	0
ntinued)	8.	Total household income - Add Lines 1 through 7 and enter the total here	8	0
Income (continued)	9.	Enter the appropriate amount from the options below		0
	10.	<ul> <li>Net household income - Subtract Line 9 from Line 8 and enter the amount here</li></ul>	10 . 00	0
		than \$30,000, you are <b>not eligible</b> 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. <b>Attach</b> a copy of <b>paid</b> real estate tax receipt(s). If your home is on more than five acres or you own a mobile home, <b>attach</b> the Assessor's Certification (Form 948)	11 . 0	0
Real Esta	12.	If you rented, enter the total amount from Certification of Rent Paid (Form(s) MO-CRP), Line 9 or \$750, whichever is less. <b>Attach</b> rent receipts or a signed statement from your landlord. <b>Note</b> : If you rent from a facility that does not pay property tax, you are <b>not eligible</b> for a Property Tax Credit	12	0
Credit		Enter the total of Lines 11 and 12, or \$1,100, whichever is less	13	<u>C</u>
J	14.	Apply Lines 10 and 13 to the chart in the instructions for MO-1040, pages 49-51 or MO-1040P, pages 29-31 to figure your Property Tax Credit. You <b>must</b> use the chart to see how much credit you are allowed. Enter this amount on Form MO-1040, Line 41 or Form MO-1040P, Line 20	14	0
		Department Use Only		
	ΙA	∟ K ∟ K ∟ U		

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



Form MO-CRP	Missouri Department of Revenue 2017 Certification of Rent Paid
	1

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
	Select this box if related to your landlord. If so, explain.
2.	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)
	Landlord's Last 4 Digits of Social Security Number  Landlord's Federal Employer Identification Number (FEIN) - if applicable
	Editable 6 Edit in Biglie 6 Goodal Goodally Manipol
	Landland's Charat Address (Miretha completed)
	Landlord's Street Address (Must be completed)  Apartment Number
	City State ZIP Code
4.	Landlord's Phone Number (Must be completed)  From:  To:
5.	Rental Period During Year (MM/DD/YY) (MM/DD/YY) (MM/DD/YY)
6	Enter your gross rent paid. Attach rent receipt(s) for each rent payment for the entire year, a signed statement
0.	from your landlord, or copies of canceled checks (front and back). If you received housing assistance, enter
	the amount of rent you paid. Note: If you rent from a facility that does not pay property tax, you are not eligible for a Property Tax Credit
7.	Select the appropriate box below and enter the corresponding percentage on Line 7
	A. Apartment, House, Mobile Home, or Duplex - 100%  F. Low Income Housing - 100% (Rent cannot exceed 40% of total
	household income.)
	B. Mobile Home Lot - 100%
	G. Shared Residence – If you shared your rent with relatives or friends (other than your spouse or children under 18), select the appropriate
	box based on the additional persons sharing rent:
	D. Skilled or Intermediate Care Nursing Home - 45%
	1 (50%) 2 (33%) 3 (25%)  E. Hotel - 100%; if meals are included - 50%
8.	Net rent paid - Multiply Line 6 by the percentage on Line 7
9.	Multiply Line 8 by 20%. Enter amount here and on Line 10 of Form MO-PTC or Line 12 of Form MO-PTS

For Privacy Notice, see instructions.

**Taxation Division** 



Missouri Department of Revenue 2017 Miscellaneous Income Tax Credits	Department Use Only (MM/DD/YY)
Name	
(Last, First)	Social Security Number
Spouse's Name	Spouse's Social
(Last, First)	Security Number
Corporation	Charter
Name	Number
Missouri Tax	Federal Employer
I.D. Number	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).

	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)
	(Coordinate 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 through 10		11.	00	00
12.			om Form MO-1040, Line 33Y for yourself and Line 33S for your spouse, 16 for income from or Form MO-1041, Line 18	12.	00	00
13			e 11, Columns 1 and 2. (Enter here and on Form MO-1120, Line 18; Form N Line 13 cannot exceed the amount on Line 12, unless the credit is refundab			00

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.

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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 <a href="http://dor.mo.gov/taxcredit/">http://dor.mo.gov/taxcredit/</a> for a description of each credit and more contact information for agencies administering each credit.

#### **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-TC
AFI	Alternative Fuel Infrastructure - (573) 751-2254	Certificate*
BFC	New or Expanded Business Facility - (573) 526-5417	Schedule 150,
	, , , , , , , , , , , , , , , , , , , ,	Fed. K-1, Form 4354
BJI	Brownfield "Jobs and Investment" - (573) 522-8004	Certificate*
DAL	Distressed Area Land Assemblage - (573) 522-8004	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 4354
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	0 40 4
550	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 SPC	Sporting Event Credit - (573) 522-8006 Sporting Contribution Credit - (573) 522-8006	Certificate* Certificate*
TDC		Certificate*
WEC	Transportation Development - (573) 751-4539 Processed Wood Energy - (573) 526-1723	Certificate*
WGC	Wine and Grape Production - (573) 751-9048	Certificate*
YOC	Youth Opportunities - (573) 751-4539	Certificate*
100	10uii Opportunites - (373) 731-4339	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) 759-6600	Certificate*
LHC	Missouri Low Income Housing - (816) 759-6668	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
BTC	Bank Tax Credit for S Corporation	Form BTC, and Form
		Shareholders INT-3,
		2823, INT-2, Fed. K-1
CIC	Children in Crisis	Contribution
		Verification from
		Issuing Agency
CFC	Champion for Children	Contribution
		Verification from
5.40	D: 11 14	Issuing Agency
DAC	Disabled Access	Federal Form 8826
D.4.T	D. C. L. C. L. D. LE. A T. LE.	and Form MO-8826
DAT	Residential Dwelling Accessibility	Form MO-DAT
FPT SHC	Food Pantry Tax	Form MO-FPT Form MO-SHC
SSC	Self-Employed Health Insurance	Form MO-SSC
33C	Public Safety Officer Surviving Spouse	FUITH WIO-SSC

## 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-TC
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 • (573) 751-7533

Alpha Attach to Code Name of Credit Form MO-TC Certificate\* DDC Developmental Disability Care Provider DVC Shelter for Victims of Domestic Violence Certificate\* MHC Maternity Home Certificate\* PRC Pregnancy Resource Certificate\* **RTA** Residential Treatment Agency Certificate\*

## Missouri Department of Health Division of Senior Services

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

Alpha

Code 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 03-2018)

<sup>\*</sup> Must be approved by the issuing agency Individuals with speech or hearing impairments may call TTY (800) 735-2966 or fax (573) 526-1881.



Form MO-2210	Missouri Department of Revenue 2017 Underpayment of Estimated Tax By Individuals
	Attach this form to Form MO-1040.

Department Use Only			
(MM/DD/YY)			

Social Security Number	Spouse's Social Security Number
Taxpayer Name	Spouse's Name
Address, City, State, and ZIP Code	

You may qualify for the Short Method to calculate your penalty. You may use the Short Method if:

- a. You qualify to use the Short Method on the Federal Form 2210 or
- b. All withholding and estimated tax payments were made equally throughout the year and
- c. You do not annualize your income.

If (a) applies or both (b) and (c) apply to you, complete Part I, Required Annual Payment and Part II, Short Method. Otherwise, compete Part I, Required Annual Payment and Part III, Regular Method.

1.	Enter your 2017 tax after credits (Form MO-1040, Line 34 less approved credits from Line 40; Property Tax Credit from Line 41.)	1	
2.	Multiply Line 1 by 90% (66 2/3% for qualified farmers)		
3.	Withholding Taxes - <b>Do not</b> include any estimated tax payments on this line	3	
4.	Subtract Line 3 from Line 1. If less than \$500, stop here; do not complete or file this form.	4	
5.	Enter the tax shown on your 2016 tax return. If you did not file a 2016 Missouri return or only filed a Property Tax Credit Claim, skip line 5 and enter the amount from Line 2 on Line 6	5	
6.	<b>Required Annual Payment</b> - Enter the smaller of Line 2 or Line 5 (Note: If Line 3 is equal to or more than Line 6, stop here; you do not owe the penalty. Do not file Form MO-2210.)	6	
7.	Enter the amount, if any, from Line 3 above		
8.	Enter the total amount, if any, of estimated tax payments you made		
9.	Add Lines 7 and 8	9	
10.	<b>Total Underpayment for Year</b> - Subtract Line 9 from Line 6. If zero or less, stop here; you do not owe the penalty. Do not file Form MO-2210	10	
		11	
12.	before 04/15/18, make the following computation to find the amount to enter on Line 12.		
	Amount on Number of days paid  Line 10 X before 04/15/18 X .0001096	12	
	2110 10 7 201010 0 1/10/10 7 1000100011111111111111	'-	
	2. 3. 4. 5. 6. 7. 8. 9. 10.	Property Tax Credit from Line 41.)  2. Multiply Line 1 by 90% (66 2/3% for qualified farmers).  2. Multiply Line 1 by 90% (66 2/3% for qualified farmers).  2. Multiply Line 3 from Line 1. If less than \$500, stop here; do not complete or file this form. You do not owe the penalty.  5. Enter the tax shown on your 2016 tax return. If you did not file a 2016 Missouri return or only filed a Property Tax Credit Claim, skip line 5 and enter the amount from Line 2 on Line 6.  6. Required Annual Payment - Enter the smaller of Line 2 or Line 5 (Note: If Line 3 is equal to or more than Line 6, stop here; you do not owe the penalty. Do not file Form MO-2210.)  7. Enter the amount, if any, from Line 3 above.  7. Enter the total amount, if any, of estimated tax payments you made.  8. Enter the total amount, if any, of estimated tax payments you made.  8. In Total Underpayment for Year - Subtract Line 9 from Line 6. If zero or less, stop here; you do not owe the penalty. Do not file Form MO-2210.  11. Multiply Line 10 by .02682  12. If the amount on Line 10 was paid on or after 04/15/18, enter 0 (zero). If the amount on Line 10 was paid before 04/15/18, make the following computation to find the amount to enter on Line 12.  Amount on Number of days paid	Property Tax Credit from Line 41.)

#### 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.



Se	ectio	on A - Figure Your Underpayment				
		nplete Lines 14 through 19. If you meet any of the exceptions directly to Line 20.	(see instruction D) to	o the penalty for all o	quarters, omit Lines 1	14 through 19 and
1	4.	Required annual payment (Enter payment as computed on Pa	art I, Line 6)			
			,		f Installments	
			Apr. 15, 2017	Jun. 15, 2017	Sept. 15, 2017	Jan. 15, 2018
1	5.	Required installment payments				
1	6.	Estimated tax paid				
1	7.	Overpayment of previous installments				
1	8.	Total payments				
1	9.	Underpayment of current installment				
19	a.	Overpayment of current installment				
19	b.	Underpayment of previous installments				
19	c.	Total overpayment				
19	d.	Total underpayment				
c.	4 :	an D. Everentians To The Density				
3		on B - Exceptions To The Penalty				
3		instruction D - For special exceptions see instruction I for service  Total amount paid and withheld from January 1 through	e in a "combat zone"	, and instruction J foi	r farmers.	1
E 4		the installment date indicated				
2	1.	Exception No. 1 - prior year's tax	25% of 2016 Tax	50% of 2016 Tax	75% of 2016 Tax	100% of 2016 Tax
		2016 tax	25% of Tax	50% of Tax	75% of Tax	100% of Tax
2		Exception No. 2 - tax on prior year's income using 2017	2070 OI TAX	3070 OF TAX	7570 OF TAX	100/0 01 142
ב		rates and exemptions	22.5% of Tax	45% of Tax	67.5% of Tax	
2	3.	Exception No. 3 - tax on annualized 2017 income				
2	4.	Exception No. 4 - tax on 2017 income over 3, 5, and 8	90% of Tax	90% of Tax	90% of Tax	
		month periods				
Se	ectio	on C - Figure the Penalty				
	Con	nplete Lines 25 through 29				
	25.	Amount of underpayment				
	26.	Date of payment, due date of installment, or April 15, 2018, whichever is earlier.				
2	7a.	Number of days between the due date of installment, and				
		either date of payment, the due date of the next				
2	7b.	installment, or December 31, 2017, whichever is earlier Number of days from January 1, 2018 or installment date				
2	R۵	to date of payment or April 15, 2018				
	oa.	Line 25 for the number of days shown on Line 27a				
2	8b.	Multiply the 4% annual interest rate times the amount on Line 25 for the number of days shown on Line 27b				
2	8c.	Total Penalty (Line 28a plus Line 28b)				
		Total amount on Line 28c. Show this amount on Line 52 of F				
		Penalty". If you have an underpayment on Line 51 of Form N the amount equal to the total of Line 51 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 2017 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 2017 tax payments equal or exceed the tax shown on your 2016 tax return. The 2016 return must cover a period of 12 months and show a tax liability.

Exception 2 - Tax on Prior Year's Income using 2017 Rates and Exemptions - This exception applies if your 2017 tax withheld and estimated tax payments equal or exceed the tax that would have been due on your 2016 income if you had computed it at 2017 rates. To determine if you qualify for this exception, use the personal exemptions allowed for 2017, but use the other facts and law applicable to your 2016 return.

Exception 3 - Tax on Annualized 2017 Income - This exception applies if your 2017 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 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 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 personal exemptions, 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 with one dependent)

1.	Wages, received during Jan., Feb., and Mar \$6,000
2.	Self-employment income during Jan., Feb., and Mar \$4,000
3.	Adjusted gross income
4.	Annualized income (\$10,000 ÷ 3 x 12)\$40,000
5.	Less:
	(a) Standard deduction
	(b) Exemptions (2 x \$2,100) + (1 x \$1,200) \$5,400
	(c) Federal tax (joint return)
6.	Annualized taxable income \$20,387
7.	Income Tax (from Missouri tax chart) \$994



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If your tax withheld and estimated tax payment for the first installment period of 2017 were at least \$224 (22.5 percent of \$994) you do not owe a penalty for that period.

Exception 4 - Tax on 2017 Income Over Periods of 3, 5, and 8 months - This exception applies if your 2017 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, 2017 to the end of the month preceding that in which an installment is due. Then compute your tax on that amount as though it represented your taxable income for 2017.

Example II (Combined return with one dependent, using standard deduction)

(1)	(2)	(3)	(4)	(5)
<b>Computation Period</b>	<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	\$21,665	\$76	\$68	\$458
Jan. 1 to Aug. 31	\$31,665	\$544	\$490	\$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, 2017, whichever is earlier. If the payment date on Line 26 is December 31, 2017, or later and the due date of the installment is April 15, 2017, then enter 260 days; for June 15, 2017, 199 days; and for September 15, 2017, 107 days.
  - For Line 27b, enter the number of days from January 1, 2018, or the 2018 installment due date to date of payment or appropriate due date of return, whichever is earlier. If the payment date is April 15, 2018, enter 105 days for the first, second, and third quarters and 90 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, 2018, consider the balance paid as of January 15, 2018.
- 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, 2018, 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
- 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 page 3 for 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, 2018, 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, 2018 (or a later date, if the installment date was after January 1) until either the date of the payment or April 15, 2018, 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 four percent. This is the penalty accruing on the underpayment during 2017.
- 28b. Multiply the amount on Line 25 by the number of days on Line 27b. Divide this amount by 365 days and multiply the product by four percent. This is the penalty accruing on the underpayment during 2018.
- 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.



## 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 Higher 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 31 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 <a href="http://dor.mo.gov/pdf/depreciation\_examples.pdf">http://dor.mo.gov/pdf/depreciation\_examples.pdf</a> 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 30.

## Line 15 - Exempt Contribution Made to a Qualified Achieving a Better Life Experience 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 are a participant claiming a subtraction for a contribution you made to the program you must **attach your statement provided by the ABLE board**. The statement must be in the name of the program participant (account owner) 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 - Total Subtractions**

Add Lines 8 through 16. Enter the total on Form MO-A, Part 1, Line 17 and on Form MO-1040, Line 4.

**Note:** Do not include income earned in other states on Line 17. Complete Form MO-NRI or Form MO-CR. See Form MO-1040, Line 29 or Line 30.

#### 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 15. 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, Line 40, 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 \$7,886.** Enter the total on Line 2. Repeat for your spouse and enter the total on Line 3.

#### **Lines 4 & 5 - Railroad Retirement Tax**

Include the amount of railroad retirement tax withheld from your wages, Tier I and Tier II, during 2017. **This amount cannot exceed \$12,517** (Tier I maximum of \$7,886 and Tier II maximum of \$4,631). 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, Line 71, 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(s) 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 Federal Form 8959.

- Wage income: Form(s) W-2, Box 6, plus Line 7 of Federal Form 8959, minus 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, minus Line 23 of Federal Form 8959.

#### **Line 7 - Self-Employment Tax**

Include the amount from Federal Form 1040, Line 57 minus Line 27, plus Federal Form 8959, Line 13; or Federal Form 1040NR, Line 55 minus 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, Schedule A, Line 5. The amount you paid in state income taxes included in your federal itemized deductions, must be subtracted to determine Missouri itemized deductions.

#### **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 Forms W-2. See page 20, 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 15), you should take the standard deduction on Form MO-1040, Line 15, 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 Forms 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 2017 social security benefits for each spouse. This information can be found on:

- Federal Form 1040A Line 14b
- Federal Form 1040 Line 20b

#### **Line 6 - Taxable Public Pension**

Include the taxable 2017 public pension for each spouse. This information can be found on:

- Federal Form 1040A Line 12b
- Federal Form 1040 Line 16b

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 you are not eligible for the social security or social security disability exemption, enter a \$0 on Line 8.

#### **Private Pension Calculation**

#### **Line 2 - Taxable Social Security Benefits**

Include the taxable 2017 social security benefits. This information can be found on:

- Federal Form 1040A Line 14b
- Federal Form 1040 Line 20b

#### **Line 6 - Taxable Pension**

Include the taxable 2017 pension received from private sources for each spouse. This information can be found on:

- Federal Form 1040A Lines 11b and 12b
- Federal Form 1040 Lines 15b and 16b

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 1040A Line 14b
- Federal Form 1040 Line 20b

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 (page 44).

#### **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 1040A Line 14b
- Federal Form 1040 Line 20b

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 (page 44).

**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	s 4 and 5	
<ul><li>1. Total social security - Enter amount f</li><li>Federal Form 1040A, Line 14a</li><li>Federal Form 1040, Line 20a</li></ul>	rom: 1) _	
	<u>Yourself</u>	<u>Spouse</u>
<ul><li>2. Enter each spouse's portion of the total social security 2</li><li>3. Divide Line 2Y and 2S by Line 1 3</li><li>4. Taxable social security</li></ul>		
Enter amount from: • Federal Form 1040A, Line 14b • Federal Form 1040, Line 20b	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 C5	Υ	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. Therefore, if you qualify for the public pension, 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 1040A, Line 12b or Federal Form 1040, Line 16b. 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 1040A, Line 12b or Federal Form 1040, Line 16b. 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 your 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 40, 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 the 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 and living together, you must file married filing combined and include all household income. Please use the social security number of the person filing the claim.

#### **Line 2 - Social Security Benefits**

Enter the amount of nontaxable social security benefits before any deductions and the amount of social security equivalent railroad retirement benefits. See the following to determine nontaxable benefits:

- Federal Form 1040, Line 20a less Line 20b
- Federal Form 1040A, Line 14a less Line 14b
- Form SSA-1099 and RRB-1099, total amount before deductions (if you did not include an amount on Federal Forms 1040 or 1040A)

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

#### **Helpful Hints**

Wait to file your return until you receive your Form SSA-1099 in January 2018. This form will list your benefits for the entire 2017 year. See the sample Form SSA-1099 on page 46.

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:

- Forms 1099-R or W-2P Total amount before deductions not included on Form MO-1040, Line 6 (Missouri adjusted gross income).
- Forms 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 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 are included in the Property Tax Credit household income. Veteran payments and benefits include education or training allowances, disability compensation, grants, and insurance proceeds. A letter from the Veterans Administration detailing the amount of your benefits needs to be attached to the Property Tax Credit Schedule (Form MO-PTS).

If a veteran is 100 percent disabled, **as a result of military service**, you are not required to include your veteran payments and benefits on Form MO-PTS. A letter from the Veterans Administration confirming the disability is 100 percent from military service needs to be attached to Form MO-PTS.

**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).

#### **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 <a href="https://www.socialsecurity.gov/myaccount">www.socialsecurity.gov/myaccount</a>, 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.

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.

#### **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, 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 Line10 is above \$27,500, and 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 2017 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 receipts from the county and city collectors office. Mortgage and financial institution statements are not acceptable.

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 isn't needed. In such cases, you can claim property tax for the mobile home and if applicable, rent for the lot. A credit **will not** be allowed on vehicles and other items listed on the personal property tax receipt.

If you share a home, report only the portion of real estate tax that was actually 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 2017. The Form MO-CRP is on the back of the Form MO-PTS.

#### **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 pay or your refund will be delayed or denied.

You cannot claim returned check fees, late fees, security and cleaning deposits, or any other deposits.

#### **Helpful Hints**

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.

Add the totals from Line 9 on all Forms MO-CRP completed, and enter the amount on Line 12, or \$750, whichever is less. Attach rent receipt(s) or a signed statement from your landlord for any rent you are claiming, along with Form MO-CRP. The rent receipt(s) or statement, must be signed by the landlord and include his or her tax identification or social security number and phone number. Copies of canceled checks (front and back) will be accepted if your landlord will not provide rent receipts or a statement. A bank image is acceptable if it is identified to be from the banking institution.

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

#### 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 ( $4,000 \times 20\%$ ). 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 2016 real estate tax in calendar year 2017, you must file a 2016 Property Tax Credit Claim

#### **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 2017, use the applicable percentage on Line 7. If you live in a hotel and meals are included in your rent payment, enter 50 percent; otherwise enter 100 percent. If two or more unmarried individuals over 18 years of age share a residence and each pay 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 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 Forms 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.

#### FORM SSA-1099 - SOCIAL SECURITY BENEFIT STATEMENT

A A B . DART OF VOLU	OCCUPITY OF			IN IN DOV 5 MAY BE TAVABLE INCOME
2017 SEE THE REVE	ERSE SIDE FOR MORE	INFOR	MATION.	'N IN BOX 5 MAY BE TAXABLE INCOME.
Box 1. Name			Box 2. Box	eneficiary's Social Security Number
BETTY TAXPAYER			000-0	00-0000
Box 3. Benefits Paid in 2017	Box 4. Benefits Repaid to S	SA in 20	)17	Box 5. Net Benefits Repaid for 2017 (Box 3 minus box 4)
*\$8,400.00	NONE			\$8,400.00
DESCRIPTION OF AN	OUNT IN BOX 3		DE	ESCRIPTION OF AMOUNT IN BOX 4
Paid by check or direct deposit	\$7,80	00.00		NONE
Medicare premiums deducted from y	our benefit \$60	00.00		
Total Additions		00.00		
Benefits for 2017	\$8,40	00.00		
			Box 6. V	oluntary Federal Income Tax Withheld
			Box 7. A	ddress
			5500	Y TAXPAYER TAXES LANE 'OWN, MO 55555-5555
*Includes: \$12.00 Paid in 2	2017 for 2016		Box 8. C	laim Number (Use this number if you need to contact SSA,
			000-00	0-0000
Form \$\$A-1099-\$M (12-2017)	DO NOT RETURN TH	JIC EO	DM TO CC	SA OR IRS 060355

Form SSA-1099-SM (12-2017)

DO NOT RETURN THIS FORM TO SSA OR IRS

060355

# Missouri Department of Revenue 2017 Individual Consumer's Use Tax Return Due Date: 04/16/2018

Department Use Only (MM/DD/YY)						
		г		1		

Reporting Period	
(MM/YY)	

1 7

Missouri Tax I.D.											
Number L L L L											
2. Last Name			First Name				M.I.	SSN			
Street Address			City						State	Zip	
3. Spouse's Last Name			First Name				M.I.	Spouse SS	N		
Street Address			City						State	Zip	
4. Street Address		Ci	ty	Zip	5. Inside City Limits	6. City/County Code(s)		Taxable urchases	8. Tax Rate	9. Amount of Tax	Ť
					Yes						
					Yes						
					Yes						
15. Provide a description of purchases you made							10. To	tal Purchases		11. Total Due	
								Interest Fo		12.	
16.  One time purchase  I expect to make future taxable p	ourchases. (s	ee instruc	etions)				,	Additions To	Тах	13.	
I have direct control, supervision, or responsibility for filing that this is a true, accurate, and complete return.	nis return ar	nd payme	ent of the tax due.	Under penal	Ities of perj	ury, I declare		Pay This Am (U.S. Funds		14.	
17. Signature(s)	_	ate (MM/	(DD/YYYY) /	Daytime Te	elephone )		DOR	ONLY		1	
Make check payable to the address listed below. Do not											

This form is not intended for use by businesses. Businesses that have a use tax liability should contact the Department of Revenue. See the address and phone number below.

What is Consumer's Use Tax? - Use tax is imposed on the storage, use, or consumption of tangible personal property in this state. You must pay consumer's use tax on tangible personal property stored, used, or consumed in Missouri unless you paid tax to the seller or the property is exempt from tax. If an out-of-state seller does not collect use tax from the purchaser, the purchaser is responsible for remitting the use tax to Missouri. A purchaser is required to file a use tax return if the cumulative purchases subject to use tax exceed \$2,000 in a calendar year. Use tax is computed on the purchase price of the goods. Please refer to the Department's website for additional information: <a href="http://dor.mo.gov/personal/consumer">http://dor.mo.gov/personal/consumer</a>.

Taxable Purchases - Compile a list of all purchases you made during the calendar year and didn't previously pay Missouri sales or use tax. You can find this information from invoices, bills, credit card statements, and canceled checks. Examples are purchases you made from the Internet, catalogs, food purchases, TV, or telephone marketing, goods from foreign countries, and aircraft. The total of all purchases during the year that were not previously taxed must be used in computing the amount of use tax due.

Due Date - The due date each year is April 15. When the due date falls on a Saturday, Sunday, or a legal holiday, the return and payment are considered timely if made on the next business day.

#### Line by Line Instructions

- 1. Enter your Missouri Tax ID Number. If you do not have a number, leave blank.
- 2. Enter your full name, Social Security Number, and complete address.
- 3. Enter your spouse's full name, Social Security Number, and complete address.
- List each address where the property purchased is stored, used, or consumed.

- Select the box "Yes" if your address is inside the city limits. This information is used to determine the correct tax rate.
- Enter the jurisdiction code for your address. These codes can be found at http://dor.mo.gov/business/sales/rates.
- Enter the taxable purchases for each reporting location during the tax period.Enter zero if you made no taxable purchases at a location during the tax period.
- 8. Enter the tax rate found at <a href="http://dor.mo.gov/business/sales/rates">http://dor.mo.gov/business/sales/rates</a>. Select the use tax rate where you reside unless you are storing, using, or consuming tangible personal property at a different location. For qualifying food purchases you will use the food use tax rate. For aircraft purchases the tax rate is calculated based on where the aircraft is hangared.
- 9. Enter the amount of tax by multiplying taxable purchases times the tax rate.
- 10. Enter total taxable purchases.
- Enter total tax due
- 12. Enter interest for late payment. The interest rate is subject to change each year. Refer to the Department's website <a href="http://dor.mo.gov/calculators/interest/">http://dor.mo.gov/calculators/interest/</a> to calculate the amount of interest due.
- 13. Enter the amount of additions to tax. The rate is 5 percent per month of total tax due,not to exceed 25 percent. Refer to the Department's website at <a href="http://dor.mo.gov/calculators/interest/">http://dor.mo.gov/calculators/interest/</a> to calculate the amount of additions due.
- 14. Enter the sum of Lines 11 through 13.
- 15. Enter a description of the purchases you made subject to use tax.
- 16. Select one of the blanks. You will be issued a Missouri Tax ID number to process your return, but you will not be required to register with the Department. If you have ongoing purchases, you will receive a preprinted Consumer's Use Tax Return (Form 53-C) to complete each year by April 15, unless you request a different filing frequency.
- 17. Sign, date, and enter your daytime telephone number.

The use tax rates may be found on the Internet at: http://dor.mo.gov/business/sales/rates/2017/.

**Mail to:** Taxation Division P.O. Box 840

Jefferson City, MO 65105-0840

**Phone:** (573) 751-2836 **Fax:** (573) 526-1881 **TTY:** (800) 735-2966

E-mail: salesuse@dor.mo.gov



Form 4340 (Revised 01-2018)

1702101000

#### Missouri Department of Revenue 2017 Individual Income Tax Payment Voucher Form MO-1040V

#### 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 17, 2018.

#### 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.

- Line 1 Enter your social security number (SSN) on Line 1. If you are filing a combined return, enter on Line 1 the first SSN as shown on your return.
- Line 2 Enter the first four letters of your last name on Line 2. See examples

onampioo.		
Name	Enter	
John Brown	BROW ]	
Juan De Jesus	DEJE	
Joan A. Lee	LEE	Please use capital
Jean McCarthy	MCCA	letters as shown.
John O'Neill	ONEI	
Pedro Torres-Lopez	TORR J	

- Line 3 If you are filing a combined return, enter on Line 3 your spouse's SSN.
- Line 4 Enter the first four letters of your spouse's last name on Line 4. See examples for Line 2, above.
- Line 5 Enter the amount of your payment in whole dollars on Line 5.

#### **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 checks returned for insufficient or uncollected funds electronically.
- Write your name, address, SSN, daytime telephone number, and "2017 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

#### **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.



again electronically.

Missouri Department of Revenue

2017 Individual Income Tax Payment Voucher (Form MO-1040V)

Please print. Make check payable to Missouri Department of Revenue. Mail Form MO-1040V and payment to the Missouri Department of Revenue, P.O. Box 371, Jefferson City. MO 65105-0371

concreti only, me cores cor n		
Name		
Spouse's Name		
Street Address		
City	State	ZIP Code
Full payment of taxes must be submitted by April 17, 20 additions to tax for failure to pay. If you pay by check, you of Revenue to process the check electronically. Any returnee	authoriz	e the Department

Social Security Number	_	-								
	_									
Name Control										
Spouse's Social										
Security Number										
Spouse's Name Control										
Amount of Payment	•									
(U.S. funds only)	\$									
1	734	7010001								
Department Use Only										
Department Use Only										

Form MO-1040V (Revised 12-2017)

A. Enter amount from Line 10 here	,	B. Enter amount from Line 13 here
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#### **2017 Property Tax Credit Chart**

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

				EROM —				EDC	)\/				— EDON		
		1076	1051	1026	1001	976	951	926	901	876	851	826	— FROM 801	776	751
		1070	1031		1001	370	231			070	051	020		770	731
		1100	1075	1050	1005	1000	075			000	0.75	050	TO-	000	775
		1100	1075	1050	1025	1000	975	950	925	900	875	850	825	800	775
FROM	TO											100 (Form			
1	14,300	1070										le for a Pro			750
14,301	14,600	1078 1069	1053 1044	1028 1019	1003 994	978 969	953 944	928 919	903 894	878 869	853 844	828 819	803 794	778	753 744
14,601 14,901	14,900 15,200	1059	1044	1019	994	959	934	909	884	859	834	809	79 <del>4</del> 784	769 759	734
15,201	15,500	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	16,100	1028	1003	978	953	928	903	878	853	828	803	778	753	728	703
16,101	16,400	1016	991	966	941	916	891	866	841	816	791	766	741	716	691
16,401	16,700	1005	980	955	930	905	880	855	830	805	780	755	730	705	680
16,701	17,000	993	968	943	918	893	868	843	818	793	768	743	718	693	668
17,001	17,300	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	929 916	904 891	879 866	854 841	829 816	804 791	779 766	754 741	729 716	704 691	679 666	654 641	629 616
17,901 18,201	18,200 18,500	941 927	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	873	848	823	798	773	748	723	698	673	648	623	598	573
19,101	19,400	883	858	833	808	783	758	733	708	683	658	633	608	583	558
19,401	19,700	868	843	818	793	768	743	718	693	668	643	618	593	568	543
19,701	20,000	852	827	802	777	752	727	702	677	652	627	602	577	552	527
20,001	20,300	836	811	786	761	736	711	686	661	636	611	586	561	536	511
20,301	20,600	819	794	769	744	719	694	669	644	619	594	569	544	519	494
20,601	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	21,500	767	742	717	692	667	642	617	592	567	542	517	492	467	442
21,501	21,800	749 731	724 706	699 681	674 656	649 631	624 606	599 581	574 556	549 531	524 506	499 481	474 456	449 431	424 406
21,801 22,101	22,100 22,400	712	687	662	637	612	587	562	537	512	487	462	437	412	387
22,401	22,700	693	668	643	618	593	568	543	518	493	468	443	418	393	368
22,701	23,000	673	648	623	598	573	548	523	498	473	448	423	398	373	348
23,001	23,300	653	628	603	578	553	528	503	478	453	428	403	378	353	328
23,301	23,600	633	608	583	558	533	508	483	458	433	408	383	358	333	308
23,601	23,900	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
24,201	24,500	570	545	520	495	470	445	420	395	370	345	320	295	270	245
24,501	24,800 25,100	548 526	523 501	498 476	473 451	448 426	423 401	398 376	373 351	348 326	323 301	298 276	273 251	248 226	223 201
24,801 25,101	25,400	504	479	454	429	404	379	354	329	304	279	254	229	204	179
25,401	25,700	481	456	431	406	381	356	331	306	281	256	231	206	181	156
25,701	26,000	457	432	407	382	357	332	307	282	257	232	207	182	157	132
26,001	26,300	434	409	384	359	334	309	284	259	234	209	184	159	134	109
26,301	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
26,901	27,200	361	336	311	286	261	236	211	186	161	136	111	86	61	36
27,201	27,500	335	310	285	260	235	210	185	160	135	110	85	60	35	10
27,501	27,800	310	285	260	235	210	185	160	135	110	85	60	35 9	10	
27,801	28,100	284 258	259 233	234 208	209 183	184 158	159 133	134 108	109 83	84 58	59 33	34 8	9		
28,101 28,401	28,400 28,700	231	206	181	156	131	106	81	56	31	6	U			
28,701	29,000	204	179	154	129	104	79	54	29	4					
29,001	29,300	177	152	127	102	77	52	27	2						
29,301	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
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#### Amount from Line B above or from Form MO-PTS, Line 13 - Total Real Estate Tax or 20% of Rent Paid

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 \$1,14,300   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 \$1,14,301   14,600   728   703   678   653   628   603   578   553   528   503   478   453   428   444   419   14,901   15,200   709   684   659   634   609   584   559   534   509   484   459   434   409   15,201   15,500   699   674   649   644   649   549   569   544   519   494   446   444   419   15,201   15,500   699   674   649   644   649   589   574   549   524   499   474   449   424   399   15,801   16,100   678   653   628   603   578   553   528   503   478   439   444   439   15,801   16,100   678   653   628   603   578   553   528   503   478   449   424   389   15,801   16,100   678   653   628   603   578   553   528   503   478   453   428   403   378   16,101   16,400   666   641   616   591   566   541   516   491   466   441   416   391   366   16,401   16,700   655   630   605   580   555   530   505   480   455   430   405   380   355   16,701   17,000   643   618   593   568   543   518   493   468   443   418   393   368   343   318   17,001   17,300   630   605   580   555   530   505   480   455   430   405   380   355   330   17,901   17,600   618   593   568   543   518   493   468   443   418   393   368   343   318   17,001   17,900   604   579   554   529   504   479   454   429   404   379   354   329   304   17,901   18,200   591   566   541   516   491   466   441   416   391   366   341   316   291   38,201   18,500   577   552   527   502   477   452   427   402   377   352   327   302   277   252   227   202   20,001   20,300   486   461   436   411   386   361   336   311   286   261   236   211   186   20,001   20,300   486   461   436   411   386   361   336   311   286   261   236   211   186   20,001   20,300   452   427   402   377   352   327   302   277   252   227   202   20,001   20,	
To   To   To   To   To   To   To   To	401
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 \$7           1         14,300         (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 Cr           14,301         14,600         728         703         678         653         628         603         578         553         528         503         478         453         428           14,301         14,600         728         703         678         653         628         603         578         553         528         503         478         453         428         4           14,901         15,200         709         684         659         634         609         584         559         534         509         484         459         434         409           15,201         15,800         689         664         639         614         589         564         539         514         489         444         449         424         399           15,801         16,100         678         653         628         603         578         553         528 <th< th=""><th>101</th></th<>	101
Refund   TO	40.
14,300	425
14,301         14,600         728         703         678         653         628         603         578         553         528         503         478         453         428           14,601         14,900         719         694         669         644         619         594         569         544         519         494         469         444         419           14,901         15,200         709         684         659         634         609         584         559         534         509         484         459         434         409           15,201         15,500         699         674         649         624         599         574         549         524         499         474         449         424         399           15,501         15,800         689         664         639         614         589         564         539         514         489         464         439         414         389           15,801         16,100         678         653         628         603         578         553         528         503         478         4453         428         403         378	
14,601         14,900         719         694         669         644         619         594         569         544         519         494         469         444         419           14,901         15,200         709         684         659         634         609         584         559         534         509         484         459         434         409           15,201         15,500         699         674         649         624         599         574         549         524         499         474         449         424         399           15,501         15,800         689         664         639         614         589         564         539         514         489         464         439         414         389           15,801         16,00         678         653         628         603         578         553         528         503         478         453         428         403         378           16,101         16,400         666         641         616         591         566         541         516         491         466         441         416         391         366      <	edit.
14,901   15,200   709   684   659   634   609   584   559   534   509   484   459   434   409     15,201   15,500   699   674   649   624   599   574   549   524   499   474   449   424   399     15,501   15,800   688   664   639   614   589   564   539   514   489   464   439   414   389     15,801   16,100   678   653   628   603   578   553   528   503   478   453   428   403   378     16,101   16,400   666   641   616   591   566   541   516   491   466   441   416   391   366     16,401   16,700   655   630   605   580   555   530   505   480   455   430   405   380   355     16,701   17,000   643   618   593   568   543   518   493   468   443   418   393   368   343     17,001   17,300   630   605   580   555   530   505   480   455   430   405   380   355     17,301   17,600   618   593   568   543   518   493   468   443   418   393   368   343     17,601   17,900   604   579   554   529   504   479   454   429   404   379   354   329   304     17,901   18,200   591   566   541   516   491   466   441   416   391   366   341   316   291     18,201   18,800   563   538   513   488   463   438   413   388   363   338   313   288   263     18,801   19,100   548   523   498   473   448   423   398   373   348   323   298   273   248     19,701   20,000   502   477   452   427   402   377   352   327   302   277     20,001   20,300   486   441   436   431   386   361   336   331   388   263   211   186     20,301   20,600   469   444   419   394   369   344   319   294   269   244   219   194   169     20,601   20,900   452   427   402   377   352   327   302   277   252   227   202     20,001   20,900   452   427   402   377   352   327   302   277   252   227   202     20,001   20,900   452   427   402   377   352   327   302   277   252   227   202     20,001   20,900   452   427   402   377   352   327   302   277   252   227   202   177   152     20,001   20,900   452   427   402   377   352   327   302   277   252   227   202   177   152     20,001   21,200   435   410   385   360   335   310   285	403
15,201   15,500   699   674   649   624   599   574   549   524   499   474   449   424   399   15,501   15,800   689   664   639   614   589   564   539   514   489   464   439   414   389   15,801   16,100   678   653   628   603   578   553   528   503   478   453   428   403   378   16,101   16,400   666   641   616   591   566   541   516   491   466   441   416   391   366   16,401   17,000   655   630   605   580   555   530   505   480   455   430   405   380   355   17,001   17,300   630   605   580   555   530   505   480   455   430   405   380   355   330   17,301   17,600   618   593   568   543   518   493   468   443   418   393   368   343   318   17,601   17,900   604   579   554   529   504   479   454   429   404   379   354   329   304   17,901   18,200   591   566   541   516   491   466   441   416   391   366   341   316   291   18,201   18,500   577   552   527   502   477   452   427   402   377   352   327   302   277   18,801   19,100   548   523   498   473   448   423   398   373   348   323   298   273   248   19,101   19,400   533   508   483   458   433   408   383   358   333   308   283   258   233   19,401   19,700   518   493   468   443   418   393   368   343   318   19,701   20,000   502   477   452   427   402   377   352   327   302   277   220   20,001   20,300   466   444   419   394   369   344   319   294   269   244   219   194   169   20,601   20,900   452   427   402   377   352   327   302   277   252   202   177   152   20,901   21,200   435   410   385   360   335   310   285   260   235   210   185   160   135	394
15,501   15,800   689   664   639   614   589   564   539   514   489   464   439   414   389   15,801   16,100   678   653   628   603   578   553   528   503   478   453   428   403   378   16,101   16,400   666   641   616   591   566   541   516   491   466   441   416   391   366   16,401   16,700   655   630   605   580   555   530   505   480   455   430   405   380   355   16,701   17,000   643   618   593   568   543   518   493   468   443   418   393   368   343   17,001   17,300   630   605   580   555   530   505   480   455   430   405   380   355   17,301   17,600   618   593   568   543   518   493   468   443   418   393   368   343   318   17,601   17,900   604   579   554   529   504   479   454   429   404   379   354   329   304   17,901   18,200   591   566   541   516   491   466   441   416   391   366   341   316   291   18,201   18,500   577   552   527   502   477   452   427   402   377   352   327   302   277   18,501   18,800   563   538   513   488   463   438   413   388   363   338   313   288   263   18,801   19,100   548   523   498   473   448   423   398   373   348   323   298   273   248   19,101   19,400   533   508   483   458   433   408   383   358   333   308   283   258   233   19,401   19,700   518   493   468   443   418   393   368   343   318   293   268   243   218   19,701   20,000   502   477   452   427   402   377   352   327   302   277   252   227   202   20,001   20,300   486   461   436   411   386   361   336   311   286   261   236   211   186   20,301   20,600   469   444   419   394   369   344   319   294   269   244   219   194   169   20,601   20,900   452   427   402   377   352   327   302   277   252   227   202   20,001   20,000   452   427   402   377   352   327   302   277   252   227   202   20,001   20,000   452   427   402   377   352   327   302   277   252   227   202   20,001   20,000   452   427   402   377   352   327   302   277   252   227   202   20,001   20,000   452   427   402   377   352   327   302   277   252   227   202	384
15,801   16,100   678   653   628   603   578   553   528   503   478   453   428   403   378     16,101   16,400   666   641   616   591   566   541   516   491   466   441   416   391   366     16,401   16,700   655   630   605   580   555   530   505   480   455   430   405   380   355     16,701   17,000   643   618   593   568   543   518   493   468   443   418   393   368   343     17,001   17,300   630   605   580   555   530   505   480   455   430   405   380   355     17,301   17,600   618   593   568   543   518   493   468   443   418   393   368   343   318     17,601   17,900   604   579   554   529   504   479   454   429   404   379   354   329   304     17,901   18,200   591   566   541   516   491   466   441   416   391   366   341   316   291     18,201   18,500   577   552   527   502   477   452   427   402   377   352   327   302   277     18,501   18,800   563   538   513   488   463   438   413   388   363   338   313   288   263     18,801   19,100   548   523   498   473   448   423   398   373   348   323   298   273   248     19,101   19,400   533   508   483   458   433   408   383   358   333   308   283   258   233     19,401   19,700   518   493   468   443   418   393   368   343   318   293   268   243   218     19,701   20,000   502   477   452   427   402   377   352   327   302   277   252   227   202     20,001   20,300   486   461   436   411   386   361   336   311   286   261   236   211   186     20,601   20,900   452   427   402   377   352   327   302   277   252   227   202     20,001   21,200   435   410   385   360   335   310   285   260   235   210   185   160   135	374
16,101         16,400         666         641         616         591         566         541         516         491         466         441         416         391         366         16,401         16,700         655         630         605         580         555         530         505         480         455         430         405         380         355         356         17,001         17,000         643         618         593         568         543         518         493         468         443         418         393         368         343         343         343         318         37,001         17,300         630         605         580         555         530         505         480         455         430         405         380         355         330         318<	364
16,401         16,700         655         630         605         580         555         530         505         480         455         430         405         380         355           16,701         17,000         643         618         593         568         543         518         493         468         443         418         393         368         343           17,001         17,300         630         605         580         555         530         505         480         455         430         405         380         355         330           17,301         17,600         618         593         568         543         518         493         468         443         418         393         368         343         318           17,601         17,900         604         579         554         529         504         479         454         429         404         379         354         329         304           17,901         18,200         591         566         541         516         491         466         441         416         391         366         341         316         291	353
16,701         17,000         643         618         593         568         543         518         493         468         443         418         393         368         343         17,001         17,300         630         605         580         555         530         505         480         455         430         405         380         355         330         368         343         318         17,301         17,600         618         593         568         543         518         493         468         443         418         393         368         343         318         318         17,601         17,900         604         579         554         529         504         479         454         429         404         379         354         329         304         318<	341
17,001         17,300         630         605         580         555         530         505         480         455         430         405         380         355         330         17,301         17,600         618         593         568         543         518         493         468         443         418         393         368         343         318           17,601         17,900         604         579         554         529         504         479         454         429         404         379         354         329         304           17,901         18,200         591         566         541         516         491         466         441         416         391         366         341         316         291           18,201         18,500         563         538         513         488         463         438         413         388         363         338         313         288         263           18,501         18,800         563         538         513         488         463         438         413         388         363         338         313         288         263           18	330
17,301         17,600         618         593         568         543         518         493         468         443         418         393         368         343         318         17,601         17,900         604         579         554         529         504         479         454         429         404         379         354         329         304         17,901         18,200         591         566         541         516         491         466         441         416         391         366         341         316         291         18,201         18,500         577         552         527         502         477         452         427         402         377         352         327         302         277         18,501         18,800         563         538         513         488         463         438         413         388         363         338         313         288         263         18,801         19,100         548         523         498         473         448         423         398         373         348         323         298         273         248         233         19,401         19,400         533         508 <th>318 305</th>	318 305
17,601         17,900         604         579         554         529         504         479         454         429         404         379         354         329         304         17,901         18,200         591         566         541         516         491         466         441         416         391         366         341         316         291         18,201         18,500         577         552         527         502         477         452         427         402         377         352         327         302         277         18,501         18,800         563         538         513         488         463         438         413         388         363         338         313         288         263         18,801         19,100         548         523         498         473         448         423         398         373         348         323         298         273         248         19,101         19,400         533         508         483         458         433         408         383         358         333         308         283         258         233         19,401         19,700         518         493         468 <th>293</th>	293
17,901         18,200         591         566         541         516         491         466         441         416         391         366         341         316         291         18,201         18,500         577         552         527         502         477         452         427         402         377         352         327         302         277         18,501         18,800         563         538         513         488         463         438         413         388         363         338         313         288         263         18,801         19,100         548         523         498         473         448         423         398         373         348         323         298         273         248         263         19,101         19,400         533         508         483         458         433         408         383         358         333         308         283         258         233         19,401         19,700         518         493         468         443         418         393         368         343         318         293         268         243         218         19,701         20,000         502         477 <th>279</th>	279
18,201         18,500         577         552         527         502         477         452         427         402         377         352         327         302         277         18,501         18,800         563         538         513         488         463         438         413         388         363         338         313         288         263         18,801         19,100         548         523         498         473         448         423         398         373         348         323         298         273         248         243         19,101         19,400         533         508         483         458         433         408         383         358         333         308         283         258         233         248         233         19,401         19,700         518         493         468         443         418         393         368         343         318         293         268         243         218         19,701         20,000         502         477         452         427         402         377         352         327         302         277         252         227         202         20,001         20,300 <th>266</th>	266
18,501         18,800         563         538         513         488         463         438         413         388         363         338         313         288         263         18,801         19,100         548         523         498         473         448         423         398         373         348         323         298         273         248         19,101         19,400         533         508         483         458         433         408         383         358         333         308         283         258         233         233         298         273         248         248         248         19,101         19,400         533         508         483         458         433         408         383         358         333         308         283         258         233         258         233         298         243         218         219         293         268         243         218         218         219,701         20,000         502         477         452         427         402         377         352         327         302         277         252         227         202         202         20,001         20,000	252
18,801         19,100         548         523         498         473         448         423         398         373         348         323         298         273         248           19,101         19,400         533         508         483         458         433         408         383         358         333         308         283         258         233           19,401         19,700         518         493         468         443         418         393         368         343         318         293         268         243         218           19,701         20,000         502         477         452         427         402         377         352         327         302         277         252         227         202           20,001         20,300         486         461         436         411         386         361         336         311         286         261         236         211         186           20,301         20,600         469         444         419         394         369         344         319         294         269         244         219         194         169	238
19,101         19,400         533         508         483         458         433         408         383         358         333         308         283         258         233           19,401         19,700         518         493         468         443         418         393         368         343         318         293         268         243         218           19,701         20,000         502         477         452         427         402         377         352         327         302         277         252         227         202           20,001         20,300         486         461         436         411         386         361         336         311         286         261         236         211         186           20,301         20,600         469         444         419         394         369         344         319         294         269         244         219         194         169           20,601         20,900         452         427         402         377         352         327         302         277         252         227         202         177         152	223
19,401         19,700         518         493         468         443         418         393         368         343         318         293         268         243         218           19,701         20,000         502         477         452         427         402         377         352         327         302         277         252         227         202           20,001         20,300         486         461         436         411         386         361         336         311         286         261         236         211         186           20,301         20,600         469         444         419         394         369         344         319         294         269         244         219         194         169           20,601         20,900         452         427         402         377         352         327         302         277         252         227         202         177         152           20,901         21,200         435         410         385         360         335         310         285         260         235         210         185         160         135 <th>208</th>	208
19,701         20,000         502         477         452         427         402         377         352         327         302         277         252         227         202           20,001         20,300         486         461         436         411         386         361         336         311         286         261         236         211         186           20,301         20,600         469         444         419         394         369         344         319         294         269         244         219         194         169           20,601         20,900         452         427         402         377         352         327         302         277         252         227         202         177         152           20,901         21,200         435         410         385         360         335         310         285         260         235         210         185         160         135	193
20,001         20,300         486         461         436         411         386         361         336         311         286         261         236         211         186           20,301         20,600         469         444         419         394         369         344         319         294         269         244         219         194         169           20,601         20,900         452         427         402         377         352         327         302         277         252         227         202         177         152           20,901         21,200         435         410         385         360         335         310         285         260         235         210         185         160         135	177
20,601         20,900         452         427         402         377         352         327         302         277         252         227         202         177         152           20,901         21,200         435         410         385         360         335         310         285         260         235         210         185         160         135	161
<b>20,901 21,200 4</b> 35 <b>4</b> 10 <b>3</b> 85 <b>3</b> 60 <b>3</b> 35 <b>3</b> 10 <b>2</b> 85 <b>2</b> 60 <b>2</b> 35 <b>2</b> 10 <b>1</b> 85 <b>1</b> 60 <b>1</b> 35	144
	127
<b>  21 201   21 500   4</b> 17   392   367   342   317   292   267   242   217   192   167   142   117	110
	92
<b>21,501 21,800</b> 399 374 349 324 299 274 249 224 199 174 149 124 99	74
<b>21,801 22,100 381 356 331 306 281 256 231 206 181 156 131 106 81</b>	56
<b>22,101 22,400</b> 362 337 312 287 262 237 212 187 162 137 112 87 62	37
22,401         22,700         343         318         293         268         243         218         193         168         143         118         93         68         43           22,701         23,000         323         298         273         248         223         198         173         148         123         98         73         48         23	18
23,001     23,300     303     278     253     228     203     178     153     128     103     78     53     28     3       23,301     23,600     283     258     233     208     183     158     133     108     83     58     33     8	
<b>23,601 23,900 2</b> 63 <b>2</b> 38 <b>2</b> 13 <b>1</b> 88 <b>1</b> 63 <b>1</b> 38 <b>1</b> 13 <b>8</b> 8 <b>6</b> 3 <b>3</b> 8 <b>1</b> 3	
<b>23,901 24,200 241 216 191 166 141 116 91 66 41 16</b>	
<b>24,201 24,500 220 195 170 145 120 95 70 45 20</b>	
<b>24,501 24,800</b> 198 173 148 123 98 73 48 23	
<b>24,801 25,100 176 151 126 101 76 51 26 1</b>	
<b>25,101</b>   <b>25,400</b>   154   129   104   79   54   29   4	
<b>25,401</b>   <b>25,700</b>   131   106   81   56   31   6	
<b>25,701</b>   <b>26,000</b>   107   82   57   32   7	
<b>26,001</b>   <b>26,300</b>   84   59   34   9	
<b>26,301 26,600</b> 60 35 10 If Line 10 is \$23,980 and	
26,601   26,900   35   10	
26,901 27,200 11 is \$525, then the tax credi	t
27,201 27,500	
27,301 27,600	
28,100   This area indicates no	
28,401 28,700 credit is allowable.	
28,701 29,000 Credit is anowasie.	
29,001 29,300	
29,301 29,600	
29,601 29,900	
29,901 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		
A. Enter amount from Line 10 here B. Enter amount from Line 13 here C. Find where these two numbers "meet" below 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					— FRC	м —				-	FROM -		
		376	351	326	301	276	251	226	201	176	151	126	101	76	51	26	1
				— TO -					T(			.20			-то-		
		400	375	350	325	300	275	250	225	200	175	150	125	100	75	50	25
FROM	TO																
FROM 1	TO 14,300													uivalent r ible for a			
14,301	14,600	378	353	328	303	278	253	228	203	178	153	128	103	78	53	28	3
14,601	14,900	369	344	319	294	269	244	219	194	169	144	119	94	69	44	19	3
14,901	15,200	359	334	309	284	259	234	209	184	159	134	109	84	59	34	9	
15,201	15,500	349	324	299	274	249	224	199	174	149	124	99	74	49	24		
15,501	15,800	339	314	289	264	239	214	189	164	139	114	89	64	39	14		
15,801	16,100	328	303	278	253	228	203	178	153	128	103	78	53	28	3		
16,101	16,400	316	291	266	241	216	191	166	141	116	91	66	41	16			
16,401	16,700	305	280	255	230	205	180	155	130	105	80	55	30	5			
16,701	17,000	293 280	268 255	243 230	218 205	193 180	168 155	143 130	118 105	93 80	68 55	43 30	18 5				
17,001 17,301	17,300 17,600	268	243	218	193	168	143	118	93	68	43	18	)				
17,601	17,000	254	229	204	179	154	129	104	79	54	29	4					
17,901	18,200	241	216	191	166	141	116	91	66	41	16	•					
18,201	18,500	227	202	177	152	127	102	77	52	27	2						
18,501	18,800	213	188	163	138	113	88	63	38	13							
18,801	19,100	198	173	148	123	98	73	48	23								
19,101	19,400	183	158	133	108	83	58	33	8								
19,401	19,700	168	143	118	93	68	43	18	<b>K</b>								
19,701	20,000	152	127	102	77	52	27	2									
20,001	20,300	136	111 94	86	61 44	36	11			\							
20,301 20,601	20,600 20,900	119 102	77	69 52	27	19 2											
20,901	21,200	85	60	35	10												
21,201	21,500	67	42	17	10					E,	kamp	lo:					
21,501	21,800	49	24							L L L	tampi	0 is \$1	10.260	and			
21,801	22,100	31	6														
22,101	22,400	12										of For					
22,401	22,700												пе іах	credit			
22,701	23,000									W	ould b	е <b>э</b> о.					
23,001	23,300																
23,301 23,601	23,600 23,900																
23,901	24,200																
24,201	24,500																
24,501	24,800																
24,801	25,100																
25,101	25,400																
25,401	25,700																
25,701	26,000																
26,001	26,300																
26,301 26,601	26,600 26,900							<b>-1</b> ·									
26,901	27,200							This a	area ir	ndicat	es no						
27,201	27,500							crec	lit is a	llowa	ble.						
27,501	27,800																
27,801	28,100																
28,101	28,400																
28,401	28,700																
28,701	29,000																
29,001	29,300																
29,301	29,600																
29,601 29,901	29,900 30,000																
∠9,901	30,000																

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

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