

MISSOURI DEPARTMENT OF  
**REVENUE**  
2023 Individual Income  
Tax Return - Long Form

For Calendar Year January 1 - December 31, 2023

Print in BLACK ink only and DO NOT STAPLE.

**Amended Return**  **Composite Return** (For use by S corporations or Partnerships)

Federal Extension - Select this box if you have an approved federal extension. Attach a copy Federal Extension (Form 4868).

Department of Social Services Application of Eligibility form attached.  Federal return attached.

If filing a fiscal year return enter the beginning and ending dates here.

Fiscal Year Beginning (MM/DD/YY)

Fiscal Year Ending (MM/DD/YY)

**Vendor Code**

**Department Use Only**

0 0 6

**Filing Status**

Single  Claimed as a Dependent  Married Filing Combined  Married Filing Separately  Head of Household  Qualifying Widow(er)

Age 62 through 64

Age 65 or Older

Blind

100% Disabled

Non-Obligated Spouse

Yourself  Spouse

Yourself  Spouse

Yourself  Spouse

Yourself  Spouse

Yourself  Spouse

**Name**

Social Security Number  -  -   Deceased in 2023 Spouse's Social Security Number  -  -   Deceased in 2023

First Name  M.I.  Last Name  Suffix

Spouse's First Name  M.I.  Spouse's Last Name  Suffix

In Care Of Name (Attorney, Executor, Personal Representative, etc.)

**Address**

Present Address (Include Apartment Number or Rural Route)

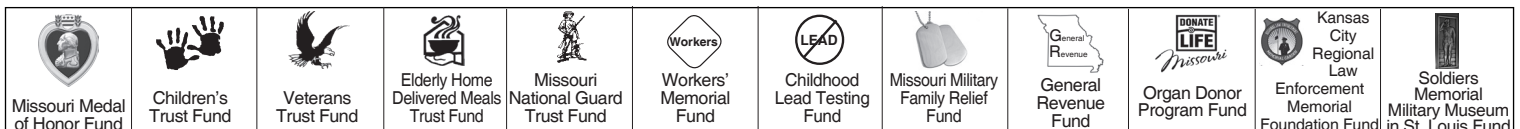
City, Town, or Post Office

State

ZIP Code

County of Residence

You may contribute to any one or all of the trust funds on Line 51. See pages 11-12 of the instructions for more trust fund information.



23322010006

Income

	Yourself (Y)		Spouse (S)	
1. Federal adjusted gross income from federal return (see worksheet on page 7 of the instructions) . . . . .	1Y		1S	
2. Total additions (from <b>Form MO-A</b> , Part 1, Line 7) . . . . .	2Y		2S	
3. Total income - Add Lines 1 and 2. . . . .	3Y		3S	
4. Total subtractions (from Form MO-A, Part 1, Line 18) . . . . .	4Y		4S	
5. Missouri adjusted gross income - Subtract Line 4 from Line 3. . . . .	5Y		5S	
6. Total Missouri adjusted gross income - Add columns 5Y and 5S . . . . .	6			
7. Income percentages - Divide columns 5Y and 5S by total on Line 6. (Must equal 100%) . . . . .	7Y		7S	

Exemptions and Deductions

8. Pension, Social Security and Social Security Disability exemption (from Form MO-A, Part 3, Section D) . . . . .	8		
9. Tax from federal return . . . . .	9		
10. Other tax from federal return. . . . .	10		
11. Total tax from federal return. Do not enter federal income tax withheld. . . . .	11		
12. Federal tax percentage – Enter the percentage based on your Missouri Adjusted Gross Income, Line 6. Use the chart below to find your percentage . . . . .	12		

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




13. Federal income tax deduction – Multiply Line 11 by the percentage on Line 12. Enter this amount not to exceed \$5,000 for an individual or \$10,000 for combined filers. . . . .	13							
14. Missouri standard deduction or itemized deductions. (If itemizing, See Form MO-A, Part 2) • Single or Married Filing Separate-\$13,850      • Head of Household-\$20,800 • Married Filing Combined or Qualifying Widow(er)-\$27,700 . . . . .	14							
15. Additional Exemption for Head of Household and Qualifying Widow(er) . . . . .	15							
16. Long-term care insurance deduction . . . . .	16							
17. Health care sharing ministry deduction. . . . .	17							
18. Active Duty Military income deduction . . . . .	18							
19. Inactive Duty Military income deduction . . . . .	19							
20. Bring jobs home deduction . . . . .	20							
21. Farmland sold, rented, leased, or crop-shared to a beginning farmer deduction. Enter the sum of Lines 21A, 21B, and 21C on Line 21 . . . . .	21							
21A. Sold			21B. Rented/ Leased			21C. Crop- Share		

Deductions Continued

22. First time home buyers deduction.                    A. <input style="width: 80px; height: 20px;" type="text"/> B. <input style="width: 80px; height: 20px;" type="text"/>	22	<input style="width: 100%; height: 20px;" type="text"/>	.00
23. Long term dignity savings account deduction . . . . .	23	<input style="width: 100%; height: 20px;" type="text"/>	.00
24. Foster parent tax deduction . . . . .	24	<input style="width: 100%; height: 20px;" type="text"/>	.00
25. Total deductions - Add Lines 8 and 13 through 24 . . . . .	25	<input style="width: 100%; height: 20px;" type="text"/>	.00
26. Subtotal - Subtract Line 25 from Line 6 . . . . .	26	<input style="width: 100%; height: 20px;" type="text"/>	.00
27. Multiply Line 26 by appropriate percentages (%) on Lines 7Y and 7S . . . . .	27Y	<input style="width: 100%; height: 20px;" type="text"/>	.00
	27S	<input style="width: 100%; height: 20px;" type="text"/>	.00
28. Enterprise zone or rural empowerment zone income modification . . . . .	28Y	<input style="width: 100%; height: 20px;" type="text"/>	.00
	28S	<input style="width: 100%; height: 20px;" type="text"/>	.00

Tax

29. Taxable income - Subtract Line 28 from Line 27 . . . . .	29Y	<input style="width: 100%; height: 20px;" type="text"/>	.00	29S	<input style="width: 100%; height: 20px;" type="text"/>	.00
30. Tax (see tax chart on page 26 of the instructions) . . . . .	30Y	<input style="width: 100%; height: 20px;" type="text"/>	.00	30S	<input style="width: 100%; height: 20px;" type="text"/>	.00
31. Resident credit - Attach <a href="#">Form MO-CR</a> and other states' income tax return(s) . . . . .	31Y	<input style="width: 100%; height: 20px;" type="text"/>	.00	31S	<input style="width: 100%; height: 20px;" type="text"/>	.00
32. Missouri income percentage - Enter 100% if not completing <a href="#">Form MO-NRI</a> . Attach Form MO-NRI and federal return if applicable.	32Y	<input style="width: 80px; height: 20px;" type="text"/>	%	32S	<input style="width: 80px; height: 20px;" type="text"/>	%
33. Balance - Subtract Line 31 from Line 30; OR multiply Line 30 by percentage on Line 32 . . . . .	33Y	<input style="width: 100%; height: 20px;" type="text"/>	.00	33S	<input style="width: 100%; height: 20px;" type="text"/>	.00
34. Other taxes - Select box and attach federal form indicated.	 23322030006					
<input type="checkbox"/> Lump sum distribution ( <a href="#">Form 4972</a> )	34Y	<input style="width: 100%; height: 20px;" type="text"/>	.00	34S	<input style="width: 100%; height: 20px;" type="text"/>	.00
<input type="checkbox"/> Recapture of low income housing credit ( <a href="#">Form 8611</a> )	35Y	<input style="width: 100%; height: 20px;" type="text"/>	.00	35S	<input style="width: 100%; height: 20px;" type="text"/>	.00
35. Subtotal - Add Lines 33 and 34 . . . . .	35Y	<input style="width: 100%; height: 20px;" type="text"/>	.00	35S	<input style="width: 100%; height: 20px;" type="text"/>	.00
36. Total Tax - Add Lines 35Y and 35S . . . . .	36	<input style="width: 100%; height: 20px;" type="text"/>	.00			

Payments and Credits

37. MISSOURI tax withheld - Attach Forms W-2 and 1099 . . . . .	37	<input style="width: 100%; height: 20px;" type="text"/>	.00
38. 2023 Missouri estimated tax payments - Include overpayment from 2022 applied to 2023 . . . . .	38	<input style="width: 100%; height: 20px;" type="text"/>	.00
39. Missouri tax payments for nonresident partners or S corporation shareholders - Attach Forms <a href="#">MO-2NR</a> and <a href="#">MO-NRP</a> . . . . .	39	<input style="width: 100%; height: 20px;" type="text"/>	.00
40. Missouri tax payments for nonresident entertainers - Attach <a href="#">Form MO-2ENT</a> . . . . .	40	<input style="width: 100%; height: 20px;" type="text"/>	.00
41. Amount paid with Missouri extension of time to file ( <a href="#">Form MO-60</a> ) . . . . .	41	<input style="width: 100%; height: 20px;" type="text"/>	.00
42. Miscellaneous tax credits (from <a href="#">Form MO-TC</a> , Line 13) - Attach Form MO-TC . . . . .	42	<input style="width: 100%; height: 20px;" type="text"/>	.00
43. Property tax credit - Attach <a href="#">Form MO-PTS</a> . . . . .	43	<input style="width: 100%; height: 20px;" type="text"/>	.00
44. Missouri Working Family Tax Credit (Attach Form MO-WFTC and federal return) . . . . .	44	<input style="width: 100%; height: 20px;" type="text"/>	.00
45. Total payments and credits - Add Lines 37 through 44 . . . . .	45	<input style="width: 100%; height: 20px;" type="text"/>	.00



Amount Due

- 54. If Line 36 is larger than Line 45 or Line 48, enter the difference.  
Amount of UNDERPAYMENT . . . . .   .
- 55. Underpayment of estimated tax penalty - Attach [Form MO-2210](#). Enter penalty amount here . . .   .   
 Select this box if you are a farmer exempt from the underpayment of estimated tax penalty.
- 56. **AMOUNT DUE** - Add Lines 54 and 55.  
If you pay by check, you authorize the Department of Revenue to process the check electronically. Any returned check may be presented again electronically . . . . .   .

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief it is true, correct, and complete. By signing or entering my name in the "Signature" field(s) below, I am providing the Department of Revenue with my signature as required under [Section 143.561, RSMo](#). Declaration of preparer (other than taxpayer) is based on all information of which he or she has knowledge. As provided in [Chapter 143, RSMo.](#), a penalty of up to \$500 shall be imposed on any individual who files a frivolous return. I also 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 am aware of any applicable reporting requirements of [Section 135.805, RSMo](#), and the penalty provisions of [Section 135.810, RSMo](#).

Signature

Signature	Date (MM/DD/YY)	
<input type="text"/>	<input type="text"/>	<input type="text"/>
Spouse's Signature (If filing combined, BOTH must sign)	Date (MM/DD/YY)	
<input type="text"/>	<input type="text"/>	<input type="text"/>
E-mail Address	Daytime Telephone	
<input type="text"/>	<input type="text"/>	
Preparer's Signature	Date (MM/DD/YY)	
<input type="text"/>	<input type="text"/>	<input type="text"/>
Preparer's FEIN, SSN, or PTIN	Preparer's Telephone	
<input type="text"/>	<input type="text"/>	
Preparer's Address	State	ZIP Code
<input type="text"/>	<input type="text"/>	<input type="text"/>

I authorize the Director of Revenue or delegate to discuss my return and attachments with the preparer or any member of the preparer's firm . . . . .  Yes  No

Did you pay a tax return preparer to complete your return, but the preparer failed to sign the return or provide an Internal Revenue Service preparer tax identification number? If you marked yes, please insert the preparer's name, address, and phone number in the applicable sections of the signature block above. . . . .  Yes  No



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**Department Use Only**

A     FA     E10     DE     F     .

Form MO-1040 (Revised 12-2023)

**Mail to: Balance Due:**  
Missouri Department of Revenue  
P.O. Box 3370  
Jefferson City, MO 65105-3370  
**Phone:** (573) 751-7200

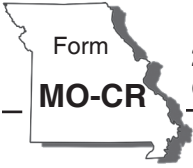
**Refund or No Amount Due:**  
Missouri Department of Revenue  
P.O. Box 3222  
Jefferson City, MO 65105-3222  
**Phone:** (573) 751-3505

**Fax:** (573) 522-1762  
**Email:** [incometaxprocessing@dor.mo.gov](mailto:incometaxprocessing@dor.mo.gov)  
**Submission of Individual Income Tax Returns**  
**Email:** [income@dor.mo.gov](mailto:income@dor.mo.gov)  
**Inquiry and correspondence**

**Ever served on active duty in the United States Armed Forces?**

If yes, visit [dor.mo.gov/military/](http://dor.mo.gov/military/) to see the services and benefits we offer to all eligible military individuals. A list of all state agency resources and benefits can be found at [veteranbenefits.mo.gov/state-benefits/](http://veteranbenefits.mo.gov/state-benefits/).





MISSOURI DEPARTMENT OF  
**REVENUE**  
**2023 Credit for Income Taxes Paid to  
 Other States or Political Subdivisions**

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.

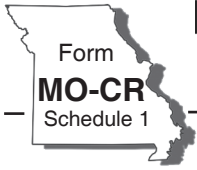
Name	Social Security Number
<input style="width: 90%;" type="text"/>	<input style="width: 20%;" type="text"/> - <input style="width: 20%;" type="text"/> - <input style="width: 20%;" type="text"/>
Spouse's Name	Spouse's Social Security Number
<input style="width: 90%;" type="text"/>	<input style="width: 20%;" type="text"/> - <input style="width: 20%;" type="text"/> - <input style="width: 20%;" type="text"/>

If you are claiming a resident credit as a shareholder of an S corporation with income earned in a non-taxed jurisdiction, complete MO-CR, Schedule 1 and see Instructions.

	Yourself (Y)		Spouse (S)	
1. Claimant's total adjusted gross income (Form MO-1040, Line 5Y and Line 5S) . . . . .	1Y	<input style="width: 60%;" type="text"/>	1S	<input style="width: 60%;" type="text"/>
		.00		.00
2. Claimant's Missouri income tax (Form MO-1040, Line 30Y and 30S). Use the two letter abbreviation for the state or name of political subdivision. See the table on back for the two letter abbreviation, or enter the name of the political subdivision below.		State of: <input style="width: 60%;" type="text"/>		State of: <input style="width: 60%;" type="text"/>
_____	2Y	<input style="width: 60%;" type="text"/>	2S	<input style="width: 60%;" type="text"/>
		.00		.00
3. Wages and commissions. . . . .	3Y	<input style="width: 60%;" type="text"/>	3S	<input style="width: 60%;" type="text"/>
		.00		.00
4. Other income (Describe nature _____ )	4Y	<input style="width: 60%;" type="text"/>	4S	<input style="width: 60%;" type="text"/>
		.00		.00
5. Total - Add Lines 3 and 4. . . . .	5Y	<input style="width: 60%;" type="text"/>	5S	<input style="width: 60%;" type="text"/>
		.00		.00
6. Minus, related adjustments (Federal Form 1040 or 1040-SR, Line 10). . . . .	6Y	<input style="width: 60%;" type="text"/>	6S	<input style="width: 60%;" type="text"/>
		.00		.00
7. Net amounts - Subtract Line 6 from Line 5 . . . . .	7Y	<input style="width: 60%;" type="text"/>	7S	<input style="width: 60%;" type="text"/>
		.00		.00
8. Percentage of your income taxed - Divide Line 7 by Line 1. . .	8Y	<input style="width: 60%;" type="text"/> %	8S	<input style="width: 60%;" type="text"/> %
		.00		.00
9. Maximum credit - Multiply Line 2 by percentage on Line 8 . . .	9Y	<input style="width: 60%;" type="text"/>	9S	<input style="width: 60%;" type="text"/>
		.00		.00
10. Income tax imposed by another state or political subdivision. <b>This is not income tax withheld.</b> The income tax must generally be reduced by all credits, except withholding and estimated tax. (See instructions.) . . . . .	10Y	<input style="width: 60%;" type="text"/>	10S	<input style="width: 60%;" type="text"/>
		.00		.00
11. Credit - Enter the smaller amount of Line 9 or Line 10 here and on Form MO-1040, Line 31Y or Line 31S. . . . .	11Y	<input style="width: 60%;" type="text"/>	11S	<input style="width: 60%;" type="text"/>
		.00		.00

Form MO-CR

Note: If you have completed Form MO-CR for credits in multiple states, add the amounts on Line 11 from each Form MO-CR and the amounts on Line 5, from each Form MO-CR, Schedule 1, before entering on Form MO-1040. The cumulative amount of credit reported on MO-1040, Line 31Y and 31S cannot exceed the Missouri tax liability.



**Resident Credit For Tax on Pro Rata Share of  
S Corporation Income Earned From a Non-Taxed Jurisdiction**

Name	Social Security Number
<input type="text"/>	<input type="text"/> - <input type="text"/> - <input type="text"/>

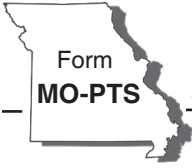
Spouse's Name	Spouse's Social Security Number
<input type="text"/>	<input type="text"/> - <input type="text"/> - <input type="text"/>

Complete Form MO-CR, Schedule 1, if you are a Missouri resident S corporation shareholder who has S corporation income from sources in another state(s) or the District of Columbia that is not subject to an income tax imposed in that jurisdiction.

State abbreviation - List all states from which the non-taxed S corporation income is sourced:

	Yourself (Y)		Spouse (S)	
1. Claimant's federal adjusted gross income (Form 1040, Line 1Y and Line 1S) . . . . .	1Y	<input type="text"/> .00	1S	<input type="text"/> .00
2. Income earned from an S corporation in a non-taxed jurisdiction . .	2Y	<input type="text"/> .00	2S	<input type="text"/> .00
3. Divide Line 2 by Line 1. Enter as a percent. If greater than 100%, enter 100% . . . . .	3Y	<input type="text"/> %	3S	<input type="text"/> %
4. Claimant's Missouri income tax (Form MO-1040, Line 30Y and 30S)	4Y	<input type="text"/> .00	4S	<input type="text"/> .00
5. Multiply Line 4 by the percentage on Line 3. Enter here and include on Form MO-1040, Line 31Y or 31S . . . . .	5Y	<input type="text"/> .00	5S	<input type="text"/> .00

Note: If you have completed Form MO-CR, Schedule 1 for credits in multiple states, add the amounts on Line 11 from each Form MO-CR and the amounts on Line 5, from each Form MO-CR, Schedule 1, before entering on Form MO-1040. The cumulative amount of credit reported on MO-1040, Line 31Y and 31S cannot exceed the Missouri tax liability.



MISSOURI DEPARTMENT OF  
**REVENUE**  
2023 Property Tax Credit Schedule

Department Use Only (MM/DD/YY)

This form must be attached to Form MO-1040.

Social Security Number

-  -

Date of Birth (MM/DD/YYYY)

First Name

M.I.

Last Name

Spouse's Social Security Number

-  -

Spouse's Date of Birth (MM/DD/YYYY)

Spouse's First Name

M.I.

Last Name

Qualifications

Select only one qualification. Copies of letters, forms, etc., must be included with claim.

- A. 65 years of age or older - You must be a full year resident. (Attach Form SSA-1099.)
- B. 100% Disabled Veteran as a result of military service (Attach letter from Department of Veterans Affairs - see instructions.)
- C. 100% Disabled (Attach letter from Social Security Administration or Form SSA-1099.)
- D. 60 years of age or older and received surviving spouse benefits (Attach Form SSA-1099.)

Filing Status

Select only one filing status. If your filing status on Form MO-1040 is head of household, you will select single filing status below. If married filing combined, you must report both incomes.

- Single
- Married - Filing Combined
- Married - Living Separate for Entire Year

Failure to provide the required attachment(s) will result in the delay or denial of your return.

Income

1. Enter the amount of income from [Form MO-1040](#), Line 6. 1  .00
2. Enter the amount of nontaxable social security benefits received by you, your spouse, and your **minor children** before any deductions and the amount of social security equivalent railroad retirement benefits. **Attach** Form(s) SSA-1099 or RRB-1099 (TIER I) 2  .00
3. Enter the total amount of pensions, annuities, dividends, rental income, unemployment compensation, or interest income not included in Line 1. Include tax exempt interest from MO-A, Part 1, Line 8. **Attach** Form(s) W-2, 1099, 1099-G, 1099-R, 1099-MISC, 1099-INT, 1099-DIV, etc 3  .00
4. Enter the amount of railroad retirement benefits (not included in Line 2) before any deductions. **Attach** Form RRB-1099-R (Tier II). Refer to [MO-A](#), Part 1, Line 11 4  .00
5. Enter the amount of veterans payments or benefits before any deductions. **Attach** letter from Veterans Affairs. See instructions, MO-1040. 5  .00



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For Privacy Notice, see Instructions.



Income (continued)

- 6. Enter the total amount received by you, your spouse, and your **minor children** from: public assistance, Supplemental Security Income (SSI), child support, or Temporary Assistance payments (TA and TANF). **Attach** a letter from the Social Security Administration that includes the total amount of assistance received if applicable . . . . .   .
- 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 or 1040-SR) . . . . .   .
- 8. Total household income - Add Lines 1 through 7 and enter the total here . . . . .   .
- 9. Enter the appropriate amount from the options below. . . . .   . 
  - **Single or Married Living Separate** - Enter \$0
  - Married and Filing Combined - **rented** or **did not own** your home for the entire year - Enter \$2,000
  - Married and Filing Combined - **owned** and **occupied** your home for the entire year - Enter \$4,000
- 10. Net household income - Subtract Line 9 from Line 8 and enter the amount here . . . . .   . 
  - If you rented or did not own and occupy your home for the entire year and Line 10 is greater than \$27,200, you are **not eligible** to file this claim.
  - If you owned and occupied your home for the entire year and Line 10 is greater than \$30,000, you are **not eligible** to file this claim.

Real Estate or Rent

- 11. If you owned your home, enter the total amount of property tax paid for your home, minus special assessments, or \$1,100, whichever is less. **Attach** a copy of **paid** real estate tax receipt(s). If your home is on more than five acres or you own a mobile home, **attach** the Assessor's Certification (**Form 948**) . . . . .   .
- 12. If you rented, enter the total amount from Certification of Rent Paid (Form(s) MO-CRP), Line 9 or \$750, whichever is less. **Attach** a completed Verification of Rent Paid (**Form 5674**). **Note:** If you rent from a facility that does not pay property tax, you are **not eligible** for a Property Tax Credit . . . . .   .

Credit

- 13. Enter the total of Lines 11 and 12, or \$1,100, whichever is less . . . . .   .
- 14. Apply Lines 10 and 13 to the chart in the instructions for MO-1040, pages 49-51 to figure your Property Tax Credit. You **must** use the chart to see how much credit you are allowed. Enter this amount on Form MO-1040, Line 43. . . . .   .

Department Use Only

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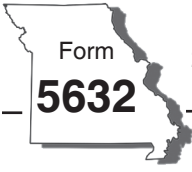
This form must be attached to Form MO-1040.



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**Ever served on active duty in the United States Armed Forces?**

If yes, visit [dor.mo.gov/military/](http://dor.mo.gov/military/) to see the services and benefits we offer to all eligible military individuals. A list of all state agency resources and benefits can be found at [veteranbenefits.mo.gov/state-benefits/](http://veteranbenefits.mo.gov/state-benefits/).



Department Use Only (MM/DD/YY)

Three sets of empty boxes for date entry (MM/DD/YY).

Taxpayer

Social Security Number

Three boxes for Social Security Number with dashes.

Spouse's Social Security Number

Three boxes for Spouse's Social Security Number with dashes.

First Name

Box for First Name

M.I.

Box for M.I.

Last Name

Box for Last Name

Suffix

Box for Suffix

Spouse's First Name

Box for Spouse's First Name

M.I.

Box for Spouse's M.I.

Spouse's Last Name

Box for Spouse's Last Name

Suffix

Box for Spouse's Suffix

Requirements

If you want to deposit your refund as a contribution to one or more Missouri MOST 529 Education Plan accounts:

- You must have an open Missouri MOST 529 Education Plan account that is administered by the Missouri Education Program. See the contact information below.
• Your total deposit must be at least \$25.
• If your overpayment is adjusted and the amount you requested to deposit exceeds your available refund, the Department will cancel your deposit and issue a refund to you.
• If your refund is offset to pay another debt, the Department will cancel your deposit.

529 Account

Enter the 11-digit MOST 529 account number and the amount you want contributed to each account. (You may contribute to a maximum of four accounts.)

A) Account Number

Box for Account Number A with a dash and a smaller box for a digit.

A) Amount

Box for Amount A with a decimal point and a box for cents.

B) Account Number

Box for Account Number B with a dash and a smaller box for a digit.

B) Amount

Box for Amount B with a decimal point and a box for cents.

C) Account Number

Box for Account Number C with a dash and a smaller box for a digit.

C) Amount

Box for Amount C with a decimal point and a box for cents.

D) Account Number

Box for Account Number D with a dash and a smaller box for a digit.

D) Amount

Box for Amount D with a decimal point and a box for cents.

Total Deposit

Add the amounts from Line A through Line D and enter the total deposit amount here and on Form MO-1040, Line 52 or Form MO-1040A, Line 17...

Box for Total Deposit with a decimal point and a box for cents.

Contact Information

MOST-Missouri's 529 Education Plan

missourimost.org

Telephone: (888) 414-6678

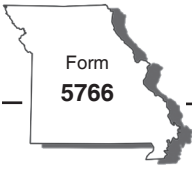
E-mail: most529@missourimost.org

Ever served on active duty in the United States Armed Forces?

If yes, visit dor.mo.gov/military/ to see the services and benefits we offer to all eligible military individuals. A list of all state agency resources and benefits can be found at veteranbenefits.mo.gov/state-benefits/.

If you wish to deposit all or a portion of your refund into a Missouri MOST 529 Education Plan, you must include this form with your Missouri Individual Income Tax Return.





First-Time Home Buyers Bank Worksheet

Department Use Only (MM/DD/YY)

Three sets of empty boxes for MM/DD/YY format.

Account Holder Information

Form fields for Account Holder Name, Spouse Name, Social Security Numbers, and Addresses.

Beneficiary Information

Form fields for Beneficiary Name, Beneficiary Social Security Number, and Beneficiary Address.

Financial Institution

Form fields for Financial Institution Name, Account Number, Total Account Deposits, Total Account Withdrawals, Interest Earned, Account Balance January 1, and Account Balance December 31.

Military

Military servicemember with home of record outside of Missouri

Expenses

Table with 3 columns: Date (MM/DD/YYYY), Description, and Amount. Includes three rows for expense entries.

First-Time Home Buyer

Deduction

Form fields for Deduction A (Contribution Deduction) and Deduction B (Accrued Interest).