Form **5143**

Missouri Department of Revenue
Safe at Home - Request for Address Confidentiality of Tax Records

Department Use Only (MM/DD/YY)

Missouri Tax I.D. Number

Social Security Number

This form must be completed and returned to the Missouri Department of Revenue, Taxation Division, to initiate or update a "Safe at Home" address for taxes administered by the Taxation Division. To change any other addresses to a "Safe at Home" address please contact the appropriate area or government agency.

Please complete the information below and attach a copy of your "Safe at Home" authorization card issued by the Secretary of State. This information will be used to update your mail-to address in the Taxation Division's records with your "Safe at Home" address. Your "Safe at Home" address will be used only on the tax types you designate below.

Individual Income Tax

Taxpayer Name (last, first, middle)			
Previous Address	City	State	ZIP Code

Business Tax

Business Name			
Previous Address	City	State	ZIP Code

Safe at Home Identification Number ____ ____ ____ ____

Tax Records

Select the box or boxes below for the tax programs that affect you.

- ☐ Individual Income Tax
- ☐ Property Tax Credit
- ☐ Fiduciary Tax
- ☐ Employer Withholding Tax
- ☐ Cigarette or Other Tobacco Products Tax
- ☐ Motor Fuel Tax
- ☐ Other: (Please Specify) _____
- ☐ Sales Tax
- ☐ Vendor's Use Tax
- ☐ Consumer's Use Tax
- ☐ Corporation Income Tax
- ☐ Corporation Franchise Tax
- ☐ Tire and Battery Fee

Signature

I understand the "Safe at Home" address will be used as my mailing address for the Department to send tax related mail for the taxes noted above. This address only affects the mailing address of my residence and does not affect any other addresses. This address will be used until I notify the Department of an address change or the Secretary of State rejects my mail because I am no longer a qualified participant of the "Safe at Home" program. I understand if I file any returns or other documents or any are filed on my behalf, with a "Non-Safe at Home" address, it constitutes notification to the Taxation Division that I am no longer in the "Safe at Home" program and the Taxation Division will no longer use the "Safe at Home" address as my mail-to address. I also confirm that I have been certified as an authorized "Safe at Home" program participant approved by the Secretary of State.

Signature	Date (MM/DD/YYYY)
	__ __/__ __/__ __ __ __

A copy of your "Safe at Home" authorization card must be attached with this form.

Form 5143 (Revised 09-2014)

Mail to: Taxation Division
P.O. Box 2200
Jefferson City, MO 65105-2200

Phone: (573) 751-3505
TTY: (800) 735-2966
E-mail: income@dor.mo.gov

Visit http://www.sos.mo.gov/business/SafeAtHome/ for additional information.

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