

MISSOURI DEPARTMENT OF REVENUE
INDIVIDUAL INCOME TAX RETURN
SINGLE/MARRIED (ONE INCOME)

2016 FORM MO-1040A

VENDOR CODE | **006**

SOCIAL SECURITY NUMBER		SPOUSE'S SOCIAL SECURITY NUMBER	
NAME (LAST)	(FIRST)	M.I.	JR, SR
		<input type="checkbox"/> DECEASED IN 2016	
SPOUSE'S (LAST)	(FIRST)	M.I.	JR, SR
		<input type="checkbox"/> DECEASED IN 2016	
IN CARE OF NAME (ATTORNEY, EXECUTOR, PERSONAL REP., ETC.)			
PRESENT ADDRESS (INCLUDE APARTMENT NO. OR RURAL ROUTE)			COUNTY OF RESIDENCE
CITY, TOWN, OR POST OFFICE	STATE	ZIP CODE	PLEASE CHECK THE APPROPRIATE BOXES THAT APPLY TO YOURSELF OR YOUR SPOUSE. AGE 65 OR OLDER BLIND 100% DISABLED NON-OBLIGATED SPOUSE <input type="checkbox"/> YOURSELF <input type="checkbox"/> YOURSELF <input type="checkbox"/> YOURSELF <input type="checkbox"/> YOURSELF <input type="checkbox"/> SPOUSE <input type="checkbox"/> SPOUSE <input type="checkbox"/> SPOUSE <input type="checkbox"/> SPOUSE

INCOME	1. Federal adjusted gross income from your 2016 federal return. (See page 6 of the instructions.).....	1		00
	2. Any state income tax refund included in your 2016 federal adjusted gross income.	2	-	00
	3. Total Missouri adjusted gross income — Subtract Line 2 from Line 1.	3	=	00

DEDUCTIONS	4. Mark your filing status box below and enter the appropriate exemption amount on Line 4. <input type="checkbox"/> A. Single — \$2,100 (See Box B before checking.) <input type="checkbox"/> D. Married filing separate — \$2,100 <input type="checkbox"/> B. Claimed as a dependent on another person's federal tax return — \$0.00 <input type="checkbox"/> E. Married filing separate (spouse NOT filing) — \$4,200 <input type="checkbox"/> C. Married filing joint federal & combined Missouri — \$4,200 <input type="checkbox"/> F. Head of household — \$3,500 Check which spouse had income: <input type="checkbox"/> Yourself <input type="checkbox"/> Spouse <input type="checkbox"/> G. Qualifying widow(er) with dependent child — \$3,500	4		00
	5. Tax from federal return (Do not enter federal income tax withheld.) — <input type="text"/> 00 Enter this amount on Line 5 or \$5,000, whichever is less. If married filing combined, enter this amount on Line 5 or \$10,000, whichever is less.	5	+	00
	6. Missouri standard deduction or itemized deductions. Single or Married Filing Separate— \$6,300 ; Head of Household — \$9,300 ; Married Filing a Combined Return or Qualifying Widow(er) — \$12,600 . If you are age 65 or older, blind, or claimed as a dependent, see your federal return or page 7. If you are itemizing, see back of form.	6	+	00
	7. Number of dependents you claimed on your Federal Form 1040 OR 1040A, Line 6c. <input type="checkbox"/> Check box if claiming a stillborn child; see instructions on Page 7..... <input type="text"/> x \$1,200 =	7	+	00
	8. Long-term care insurance deduction.....	8	+	00
	9. Total Deductions — Add Lines 4 through 8.....	9	=	00
	10. Missouri Taxable Income — Subtract Line 9 from Line 3.....	10		00
	11. Tax — Use the tax chart on the back of this form to figure the tax.	11		00
	12. Missouri tax withheld from your Forms W-2 and Forms 1099. Attach copies of Forms W-2 and Forms 1099.	12		00

TAX	10. Missouri Taxable Income — Subtract Line 9 from Line 3.....	10		00
	11. Tax — Use the tax chart on the back of this form to figure the tax.	11		00
	12. Missouri tax withheld from your Forms W-2 and Forms 1099. Attach copies of Forms W-2 and Forms 1099.	12		00
	13. Any Missouri estimated tax payments made for 2016 (include overpayment from 2015 applied to 2016)	13		00

REFUND	14. Total Payments — Add Lines 12 and 13.....	14		00
	15. If Line 14 (Total Payments) is more than Line 11 (Total Tax), enter the difference (amount of overpayment) here. (If Line 14 is less than Line 11, skip to Line 20.).....	15		00
	16. Amount from Line 15 that you want applied to your 2017 estimated tax	16		00
	17. Enter the amount of your donation in the trust fund boxes to the right. See instructions for fund codes...17.			
	18. Amount from Line 15 to be deposited into a Missouri 529 College Savings Plan (MOST) account. Enter amount from Line E of Form 5632.	18		00

Children's Trust Fund	Veterans Delivered Meals Trust Fund	Elderly Home Meals Trust Fund	Missouri National Guard Trust Fund	Workers Memorial Fund	Childhood Lead Testing Fund	Missouri Military Family Relief Fund	General Revenue Fund	Organ Donor Program Fund	Additional Fund Code (See Instr.)	Additional Fund Code (See Instr.)
:00	:00	:00	:00	:00	:00	:00	:00	:00	:00	:00

AMOUNT DUE	19. REFUND - Subtract Lines 16, 17, and 18 from Line 15 and enter here. This is your refund. Sign below and mail to: Department of Revenue, P.O. Box 3222, Jefferson City, MO 65105-3222.	19		00
	20. AMOUNT DUE - If Line 14 is less than Line 11, enter the difference here. You have an amount due. Sign below and mail to: Department of Revenue, P.O. Box 3370, Jefferson City, MO 65105-3370. See instructions for Line 20.....	20		00

If you would like your refund deposited directly to your checking or savings account, complete boxes a, b, and c below.

a. Routing Number b. Account Number c. Checking Savings

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. Declaration of preparer (other than taxpayer) is based on all information of which he or she has any 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 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

E-MAIL ADDRESS: _____ PREPARER'S PHONE: _____

SIGNATURE	DATE	PREPARER'S SIGNATURE	FEIN, SSN, OR PTIN
SPOUSE'S SIGNATURE (If filing combined, BOTH must sign)	DAYTIME TELEPHONE	PREPARER'S ADDRESS AND ZIP CODE	DATE

Missouri Itemized Deductions

- Complete this section only if you itemized deductions on your federal return. (See the information on page 7.)
- Attach a copy of your Federal Form 1040 (pages 1 and 2) and Federal Schedule A.
- If you are subject to "additional Medicare tax", attach a copy of Federal Form 8959.

1. Total federal itemized deductions from Federal Form 1040, Line 40	1		00
2. 2016 Social security tax	2		00
3. 2016 Railroad retirement tax — (Tier I and Tier II)	3		00
4. 2016 Medicare tax. See instructions on page 9.	4		00
5. 2016 Self-employment tax. See instructions on Page 9.	5		00
6. Total - Add Lines 1 through 5	6		00
7. State and local income taxes. From Federal Schedule A, Line 5 or see the worksheet below.	7		00
8. Earnings taxes included in Line 7. See instructions on Page 9.	8		00
9. Net state income taxes. Subtract Line 8 from Line 7 or enter Line 8 from worksheet below.	9		00
10. MISSOURI ITEMIZED DEDUCTIONS - Subtract Line 9 from Line 6. Enter here and on front of form, Line 6	10		00

Note: If Line 10 is less than your federal standard deduction, see information on pages 6 & 7.

Worksheet For Net State Income Taxes, Line 9 of Missouri Itemized Deductions

Complete this worksheet only if your federal adjusted gross income from federal Form 1040, Line 37 is more than \$311,300 if married filing combined or qualifying widow(er), \$285,350 if head of household, \$259,400 if single or claimed as a dependent, or \$155,650 if married filing separate. If your federal adjusted gross income is less than or equal to these amounts, do not complete this worksheet. Attach a copy of your Federal Itemized Deduction Worksheet (Page A-13 of Federal Schedule A instructions).

1. Enter amount from Federal Itemized Deduction Worksheet, Line 3 (See page A-13 of Federal Schedule A instructions.) If \$0 or less, enter "0".	1		00
2. Enter amount from Federal Itemized Deduction Worksheet, Line 9 (See Federal Schedule A instructions.)	2		00
3. State and local income taxes from Federal Form 1040, Schedule A, Line 5	3		00
4. Earnings taxes included on Federal Form 1040, Schedule A, Line 5	4		00
5. Subtract Line 4 from Line 3.	5		00
6. Divide Line 5 by Line 1.	6		%
7. Multiply Line 2 by Line 6.	7		00
8. Subtract Line 7 from Line 5. Enter here and on Missouri Itemized Deductions, Line 9, above.	8		00

2016 TAX CHART

If Missouri taxable income from Form MO-1040A, Line 10, is less than \$9,000, use the chart to figure tax; if more than \$9,000, use worksheet below or use the online tax calculator at <http://dor.mo.gov/personal/individual/>.

If the Missouri taxable income is:	The tax is:
\$0 to \$99	\$0
At least \$100 but not over \$1,000	1½% of the Missouri taxable income
Over \$1,000 but not over \$2,000	\$15 plus 2% of excess over \$1,000
Over \$2,000 but not over \$3,000	\$35 plus 2½% of excess over \$2,000
Over \$3,000 but not over \$4,000	\$60 plus 3% of excess over \$3,000
Over \$4,000 but not over \$5,000	\$90 plus 3½% of excess over \$4,000
Over \$5,000 but not over \$6,000	\$125 plus 4% of excess over \$5,000
Over \$6,000 but not over \$7,000	\$165 plus 4½% of excess over \$6,000
Over \$7,000 but not over \$8,000	\$210 plus 5% of excess over \$7,000
Over \$8,000 but not over \$9,000	\$260 plus 5½% of excess over \$8,000
Over \$9,000	\$315 plus 6% of excess over \$9,000

FIGURING TAX ON \$9,000 OR LESS

Example: If Line 10 is \$3,090, the tax would be computed as follows: \$60 + \$2.70 (3% of \$90) = \$62.70. The whole dollar amount to enter on Line 11 would be \$63.

FIGURING TAX OVER \$9,000

Missouri taxable income (Line 10)	\$	12,000	Example	\$ 12,000
Subtract \$9,000	- \$	9,000		- \$ 9,000
Difference	= \$	3,000		= \$ 3,000
Multiply by 6%	x	6%		x 6%
Tax on income over \$9,000	= \$	180		= \$ 180
Add \$315 (tax on first \$9,000)	+ \$	315		+ \$ 315
TOTAL MISSOURI TAX	= \$	495		= \$ 495

If more than \$9,000, tax is \$315 PLUS 6% of excess over \$9,000.
Round to nearest whole dollar and enter on Form MO-1040A, Line 11.



Missouri Department of Revenue
2016 MOST - Missouri's 529 College Savings Plan
Direct Deposit Form - Individual Income Tax

Taxpayer	Last Name	First Name	Social Security Number ____ - ____ - ____
	Spouse's Last Name	Spouse's First Name	Spouse's Social Security Number ____ - ____ - ____

Requirements	<p>If you want to deposit your refund as a contribution to one or more Missouri MOST 529 College Savings Plan accounts:</p> <ul style="list-style-type: none"> You must have an open Missouri MOST 529 College Savings Plan account that is administered by the Missouri Higher Education Savings 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.
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Instructions	<ul style="list-style-type: none"> Provide your name and social security number. If you are married and filing a combined return, also provide your spouse's name and social security number. Enter below 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.) Add the amounts from Lines A through D and enter the "Total Deposit" below and on your Missouri Individual Income Tax Return.
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529 Account	A) Account Number _____ - _____	A) Amount .00
	B) Account Number _____ - _____	B) Amount .00
	C) Account Number _____ - _____	C) Amount .00
	D) Account Number _____ - _____	D) Amount .00
	Enter the Total Deposit amount on Form MO-1040, Line 48; Form MO-1040A, Line 18; or Form MO-1040P, Line 25.	E) Total Deposit .00

Contact Information	<p>MOST-Missouri's 529 College Savings Plan https://www.missourimost.org Telephone: (888) 414-6678</p>	<p>E-mail: most529@missourimost.org</p>
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If you wish to deposit all or a portion of your refund into a Missouri MOST 529 College Savings Plan, you must include this form with your Missouri Individual Income Tax Return.