

MISSOURI INDIVIDUAL INCOME TAX RETURN SINGLE/MARRIED (INCOME FROM ONE SPOUSE)—SHORT FORM

2014 FORM MO-1040A

LAST NAME FIRST NAME MIDDLE INITIAL DECEASED SOCIAL SECURITY NUMBER						SOFTWARE										
								2014			_				VENDOR COD (Assigned by DO	E
SPOUSE'S LAST NAME		FI	IRST NAME			MIDDLE I	NITIAL [ED SPOUS			TY NUN			511)	
IN CARE OF MANY ASSESSMENT OF THE STATE OF T			TOD DEDCC	NAL DEDDE	CENTATIVE E	TC \								 Y OF RESID		\dashv
IN CARE OF NAME (ATTORNEY, EXECUTOR, PERSONAL REPRESENTATIVE, ETC.)								١	JOUNT	Y OF RESIL	DENCE					
DDI	CENT	ADDDECC (INCLUDE ADADTM	IENT NO. OF	DUDAL DO	NITE\		CITY TOW	/N. OD D	007.05	TICE STAT	T AND ZID CC	- L				\dashv
PRESENT ADDRESS (INCLUDE APARTMENT NO. OR RURAL ROUTE) CITY, TOWN, OR POST OFFICE, STATE, AND ZIP CODE								IDE								
DI	LEVEE	CHECK THE APPROPRIATE	AGE 65	OR OLDER	}	BLIND		100%	DISABL	LED	NON	I-OBL	GATE	D SPOUSE		
		THAT APPLY TO YOURSELF		JRSELF	-	YOURSE	LF	$\overline{}$	DURSELF			YOURS			=	
					SPOUS											
111	4	Fodoral adjusted areas in	aama fram	201	4 fodoral ratu	m /Coo no	as C of the i	ootru oti	ono)			1				00
		Federal adjusted gross inc					_									00
Š		Any state income tax ref Total Missouri adjusted					_					3	=			00
		•										3	-			00
	4.	Mark your filing status be					otion amou	nt on Li	ine 4.							
		☐ A. Single — \$2,100									— \$2,100					
		 ■ B. Claimed as a dependent on another person's federal tax return — \$0.00 ■ E. Married filing separate (spouse NOT filing) — \$4,200 														
		C. Married filing joint		combined	l Missouri —	\$4.200				ehold —	\$3,500					
		Check which spo			· · · · · · · · · · · · · · · · · · ·	ų ., _ 00	☐ G. (Qualifyi	ng wid	low(er) wi	th					
S		Yourself					(depend	ent chi	ild — \$3, 5	500	4				00
DEDUCTIONS	5.	Tax from federal return (I	Do not		\rightarrow	Enter thi	s amount or	Line 5	or \$5.0	000. which	never is less.					
E		enter federal income tax		.) — [d filing com			,						
릷						or \$10,0	00, whichev	er is le	ss			5	+			00
ᆸ	6.	Missouri standard deduc														
		Household — \$9,100; Ma						— \$12	,400.	If you are	age 65 or					
		older, blind, or claimed a If you are itemizing, see										6	+			00
	7	Number of dependents											<u> </u>			\dashv
	۲.	(Do not include yourse								x \$1,200	=	7	+			00
	8.	Long-term care insurance	_									8	+			00
		Total Deductions — Add											=			00
~	10	Missouri Taxable Income	e — Subt	ract Line 9	9 from Line 3	3						10				00
4		Tax — Use the tax chart														00
												_				$\overline{}$
				99. Attach copies of Forms W-2 and Forms 1099 ude overpayment from 2013 applied to 2014)								-	00			
		•									,	. 13				00
		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 overpayme here. (If Line 14 is less than Line 11, skip to Line 19.)							. 15				00			
Ω	16.	Amount from Line 15 that you want applied to your 2015 estimated tax.											00			
REFUND		Enter the amount		ж арриоа И —	10 your 20 i	泉/		$\overline{}$			General	DONA	TEI'	A dalki a a al		\neg
분		of your donation in	4 T			Missouri	(Workers)	LEAD	' I I	Missouri	Revenue	LĬF	E	Additional Fund Code	Additional Fund Coo	de
		the trust fund boxes to the right. See the	Children's	Veterans	Elderly Home Delivered Meals	National Guard Trust Fund	Workers' Memorial Fund	Childho Lead Tes		Military Family Relief	General Revenue	Organ E		(See Instr.)	(See Inst	r.)
		instructions for	Trust Fund	Trust Fund	Trust Fund			Fund	ļ .	Fund	Fund	Program	1			_
		fund codes 17.	00	00	00	00	00		00	00	00	_	00	į (00	00
	18.	REFUND - Subtract Line	es 16 and	17 from L	ine 15 and e	nter here.	This is your	refund	. Sign	below a	nd mail to:					
		Department of Revenu	ıe, P.O. B	ox 500, J	efferson Ci	ty, MO 651	06-0500					. 18				00
AMOUNT DUE	19.	AMOUNT DUE - If Line	14 is less	than Line	11, enter th	ne differenc	e here. You	ı have	an am	ount due.						\neg
틸		Sign below and mail to:														
á		See instructions for Line	9 19									19				00
AM	If yo	ou pay by check, you authori	ize the Dep	artment of	Revenue to pr	rocess the c	heck electroi	nically.	Any ch	eck return	ed unpaid ma	y be p	resent	ed again e	electronical	у.
		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														
						or she has any knowledge. As provided in Chapter 143, RSMo, a penalty of up to \$500 shall be im				mposed	nposed on any individual who files a frivolous					
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. VES NO							any lan onemptic									
								PREPARER'S PHONE								
¥		ATURE			TE (MMDDYYY	Υ)	PREPAR	FR'S SIC	NATIIP	F		1) EIN, SSN, (OR PTIN	\dashv
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ഗ	SPOLI	SE'S SIGNATURE (If filing combine	ed BOTH mi		// YTIME TELEPH		PREPAR	FR'S ADI	DRESS	AND ZIP CO	DDF			DATE (MI	MDDYYYY)	\dashv
	3, 33	5 5.5. U. TOTILE (II TIMING CONTIDIN	, 50 1111110				/ INC. AIX	0 ADI						2.11 = (1011		
				1)	_								/	/	- 1

	Missouri Itemized Deductions		
• A	omplete this section only if you itemized deductions on your federal return. (See the information on page 7.) ttach a copy of your Federal Form 1040 (pages 1 and 2) and Federal Schedule A. 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.	2014 Social security tax	2	00
	2014 Railroad retirement tax — (Tier I and Tier II)	3	00
4.	2014 Medicare tax. See instructions on page 9	4	00
	2014 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		
8.	Earnings taxes included in Line 7. See instructions on Page 9		
9.	Net state income taxes. Subtract Line 8 from Line 7 or enter Line 8 from worksheet below	9	00
10	MISSOLIRLITEMIZED DEDITICTIONS - Subtract Line 9 from Line 6. Enter here and on front of form. Line 6	10	00

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

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

Complete this worksheet only if your federal adjusted gross income from federal Form 1040, Line 37 is more than \$305,050 if married filing combined or qualifying widow(er), \$279,650 if head of household, \$254,200 if single or claimed as a dependent, or \$152,525 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-9 of Federal Schedule A instructions).

Enter amount from Federal Itemized Deduction Worksheet, Line 3		
(See page A-9 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

2014 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	11/2% 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 21/2% 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 31/2% 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 41/2% 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 51/2% 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.

IGURING TAX OVER \$9,000

Example If more than \$9,000, tax is \$315 PLUS 6% of Missouri taxable income (Line 10)..... \$ 12,000 excess over \$9,000. 9.000 Subtract \$9,000 - \$ \$ 9,000 Round to nearest whole Difference = \$_ \$ 3,000 dollar and enter on Multiply by 6%..... x Form MO-1040A, Line 11. 6% Tax on income over \$9,000 = \$ Add \$315 (tax on first \$9,000) + \$ \$ 180 315 \$ 315 TOTAL MISSOURI TAX = \$