



MISSOURI DEPARTMENT OF REVENUE **2009 FORM MO-1040**  
**INDIVIDUAL INCOME TAX RETURN—LONG FORM**

**1040 2DTest 1**

FOR CALENDAR YEAR JAN. 1—DEC. 31, 2009, OR FISCAL YEAR BEGINNING  
 2009, ENDING 20

**AMENDED RETURN** — CHECK HERE  SOFTWARE VENDOR CODE

**NAME AND ADDRESS**  
 SOCIAL SECURITY NUMBER 400-00-6100 SPOUSE'S SOCIAL SECURITY NUMBER 400-00-6101

NAME (LAST) (FIRST) M.I. JR, SR  
 Johnson Ray J.  DECEASED IN 2009  
 SPOUSE'S (LAST) (FIRST) M.I. JR, SR  
 Johnson Sandra D.

IN CARE OF NAME (ATTORNEY, EXECUTOR, PERSONAL REPRESENTATIVE, ETC.) COUNTY OF RESIDENCE **Cole** SCHOOL DISTRICT NO. **224**

PRESENT ADDRESS (INCLUDE APARTMENT NUMBER OR RURAL ROUTE) **101 Maple Street** CITY, TOWN, OR POST OFFICE **Jefferson City** STATE **MO** ZIP CODE **65101**

You may contribute to any one or all of the trust funds on Line 45. See pages 9–10 for a description of each trust fund, as well as trust fund codes to enter on Line 45.

Children's  Veterans  Elderly Home Delivered Meals  Missouri National Guard  Workers' Memorial  Childhood Lead Testing  Missouri Military Family Relief  General Revenue  After School Retreat

**PLEASE CHECK THE APPROPRIATE BOXES THAT APPLY TO YOURSELF OR YOUR SPOUSE AS OF DECEMBER 31, 2009.**

**AGE 62 THROUGH 64**  YOURSELF  SPOUSE  
**AGE 65 OR OLDER**  YOURSELF  SPOUSE  
**BLIND**  YOURSELF  SPOUSE  
**100% DISABLED**  YOURSELF  SPOUSE  
**NON-OBLIGATED SPOUSE**  YOURSELF  SPOUSE

	Yourself		Spouse	
	1Y	2Y	1S	2S
1. Federal adjusted gross income from your 2009 federal return (See worksheet on page 6.)	45,670	00	4,850	00
2. Total additions (from Form MO-A, Part 1, Line 6)		00		00
3. Total income — Add Lines 1 and 2.	45,670	00	4,850	00
4. Total subtractions (from Form MO-A, Part 1, Line 14)	420	00		00
5. Missouri adjusted gross income — Subtract Line 4 from Line 3.	45,250	00	4,850	00
6. Total Missouri adjusted gross income — Add columns 5Y and 5S.	6		50,100 00	
7. Income percentages — Divide columns 5Y and 5S by total on Line 6. (Must equal 100%)	7Y		7S	
	90 %		10 %	

<b>EXEMPTIONS AND DEDUCTIONS</b>	8. Pension and Social Security/Social Security disability exemption (from Form MO-A, Part 3)	8	0	00
	9. Mark your filing status box below and enter the appropriate exemption amount on Line 9. <input type="checkbox"/> A. Single — \$2,100 (See Box B before checking.) <input type="checkbox"/> E. Married filing separate (spouse NOT filing) — \$4,200 <input type="checkbox"/> B. Claimed as a dependent on another person's federal tax return — \$0.00 <input type="checkbox"/> F. Head of household — \$3,500 <input checked="" type="checkbox"/> C. Married filing joint federal & combined Missouri — \$4,200 <input type="checkbox"/> G. Qualifying widow(er) with dependent child — \$3,500 <input type="checkbox"/> D. Married filing separate — \$2,100	9	4,200	00
	10. Tax from federal return (Do not enter amount from your Form W-2(s)—Do Not Enter Federal Tax Withheld.) • Federal Form 1040, Line 56 minus Lines 45 and 64a; or • Federal Form 1040A, Line 35 minus Line 40a and alternative minimum tax on Line 28; or • Federal Form 1040EZ, Line 11 minus Line 8a	10	0	00
	11. Other tax from federal return — Attach copy of your federal return (pages 1 and 2).	11	00	
	12. Total tax from federal return — Add Lines 10 and 11.	12	0	00
	13. Federal tax deduction — Enter amount from Line 12 not to exceed \$5,000 for individual filer; \$10,000 for combined filers.	13	0	00
	14. Missouri standard deduction OR itemized deductions. Single or Married Filing Separate — \$5,700; Head of Household — \$8,350; married Filing a Combined Return or Qualifying Widow(er) — \$11,400; If you are age 65 or older, blind, claimed as a dependent, or if you claimed an additional standard deduction, see your federal return or page 7. If itemizing, see Form MO-A, Part 2.	14	14,756	00
	15. Number of dependents from Federal Form 1040 OR 1040A, Line 6c (DO NOT INCLUDE YOURSELF OR SPOUSE.)	15	3,600	00
	16. Number of dependents on Line 15 who are 65 years of age or older and do not receive Medicaid or state funding (DO NOT INCLUDE YOURSELF OR SPOUSE.)	16	0	00
	17. Long-term care insurance deduction	17	0	00
	18. Health care sharing ministry deduction	18	0	00
	19. Total deductions — Add Lines 8, 9, 13, 14, 15, 16, 17, and 18.	19	22,556	00
	20. Subtotal — Subtract Line 19 from Line 6.	20	27,544	00
	21. Multiply Line 20 by appropriate percentages (%) on Lines 7Y and 7S.	21Y	24,790	00
	22. Enterprise zone or rural empowerment zone income modification	22Y	0	00
	23. Subtract Line 22 from Line 21. Enter here and on Line 24.	23Y	24,790	00

TAX	Yourself		Spouse	
	Line	Amount	Line	Amount
24. Taxable income amount from Lines 23Y and 23S	24Y	24,790 00	24S	2,754 00
25. Tax. (See tax table on page 38 of the instructions.)	25Y	1,262 00	25S	54 00
26. Resident credit — <b>Attach Form MO-CR and other states' income tax return(s). OR</b>	26Y	0 00	26S	0 00
27. Missouri income percentage — Enter 100% unless you are completing Form MO-NRI. <b>Attach Form MO-NRI and a copy of your federal return if less than 100%.</b> Check the box if you or your spouse is a professional entertainer or a member of a professional athletic team. <input type="checkbox"/> YOURSELF <input type="checkbox"/> SPOUSE	27Y	76 %	27S	12 %
28. Balance — Subtract Line 26 from Line 25; OR Multiply Line 25 by percentage on Line 27.	28Y	959 00	28S	6 00
29. Other taxes (Check box and attach federal form indicated.) <input type="checkbox"/> Lump sum distribution (Form 4972) <input type="checkbox"/> Recapture of low income housing credit (Form 8611)	29Y	0 00	29S	0 00
30. Subtotal — Add Lines 28 and 29.	30Y	959 00	30S	6 00
31. Total Tax — Add Lines 30Y and 30S.	31	965 00		

PAYMENTS / CREDITS	Line	Amount
	32. MISSOURI tax withheld — <b>Attach Form W-2(s) and/or Form 1099(s).</b>	32
33. 2009 Missouri estimated tax payments (include overpayment from 2008 applied to 2009)	33	0 00
34. Missouri tax payments for nonresident partners or S corporation shareholders — <b>Attach Form MO-2NR.</b>	34	0 00
35. Missouri tax payments for nonresident entertainers — <b>Attach Form MO-2ENT.</b>	35	0 00
36. Amount paid with Missouri extension of time to file (Form MO-60)	36	0 00
37. Miscellaneous tax credits (from Form MO-TC, Line 13) — <b>Attach Form MO-TC.</b>	37	0 00
38. Property tax credit — <b>Attach Form MO-PTS.</b>	38	0 00
39. Total payments and credits — Add Lines 32 through 38.	39	2,200 00

**Skip Lines 40–42 if you are not filing an amended return.**

AMENDED RETURN	Line	Amount
	40. Amount paid on original return	40
41. Overpayment as shown (or adjusted) on original return	41	00
INDICATE REASON(S) FOR AMENDING.		
<input type="checkbox"/> A. Federal audit . . . . . Enter date of IRS report.		
<input type="checkbox"/> B. Net operating loss carryback . . . . . Enter year of loss.		
<input type="checkbox"/> C. Investment tax credit carryback . . . . . Enter year of credit.		
<input type="checkbox"/> D. Correction other than A, B, or C . . . . . Enter date of federal amended return, if filed.		
42. Amended Return — total payments and credits. Add Line 40 to Line 39 or subtract Line 41 from Line 39.	42	00

43. If Line 39, or if amended return, Line 42, is larger than Line 31, enter difference (amount of <b>OVERPAYMENT</b> ) here.	43	1,235 00
44. Amount of Line 43 to be applied to your 2010 estimated tax	44	0 00
45. Enter the amount of your donation in the trust fund boxes to the right. See instructions for trust fund codes.	45	00
46. Overpayment to be refunded to you. Subtract Lines 44 and 45 from Line 43 and enter here. <b>Sign below</b> and mail return to: <b>Department of Revenue, PO BOX 3222, JEFFERSON CITY, MO 65105-3222</b>	46	1,235 00
47. If Line 31 is larger than Line 39 or Line 42, enter the difference (amount of <b>UNDERPAYMENT</b> ) here.	47	0 00
48. Underpayment of estimated tax penalty — <b>Attach Form MO-2210.</b> Enter penalty amount here.	48	0 00
49. Total amount due — Add Lines 47 and 48 and enter here. <b>Sign below</b> and mail return and payment to: <b>Department of Revenue, PO BOX 3370, JEFFERSON CITY, MO 65105-3370.</b> Please write your social security number(s) and daytime phone number on your check or money order (U.S. funds only).  Make payable to Missouri Department of Revenue.	49	0 00

**If you pay by check, you authorize the Department of Revenue to process the check electronically. Any check returned unpaid 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. Declaration of preparer (other than taxpayer) is based on all information of which he/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. <input type="checkbox"/> YES <input type="checkbox"/> NO		E-MAIL ADDRESS	PREPARER'S TELEPHONE
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 DEPARTMENT OF REVENUE  
INDIVIDUAL INCOME TAX  
ADJUSTMENTS

2009  
FORM  
MO-A

Attachment Sequence No. 1040-01

ATTACH TO FORM MO-1040.  
ATTACH YOUR FEDERAL RETURN. See information  
beginning on page 11 to assist you in completing this form.

Table with 4 columns: LAST NAME, FIRST NAME, INITIAL, SOCIAL SECURITY NO. for Johnson, Ray, J, 400006100 and Spouse's LAST NAME, FIRST NAME, INITIAL, SPOUSE'S SOCIAL SECURITY NO. for Johnson, Sandra, D, 400006101

PART 1 — MISSOURI MODIFICATIONS TO FEDERAL ADJUSTED GROSS INCOME (SEE PAGE 11).

ADDITIONS table with columns Y-YOURSELF and S-SPOUSE. Rows 1-6 including Interest on state and local obligations, Partnership, Nonqualified distribution, Food Pantry contributions, Nonresident Property Tax, and TOTAL ADDITIONS.

SUBTRACTIONS table with columns Y-YOURSELF and S-SPOUSE. Rows 7-14 including Interest from exempt federal obligations, State income tax refund, Partnership, Exempt contributions, Qualified Health Insurance Premiums, Missouri depreciation adjustment, Home Energy Audit Expenses, and TOTAL SUBTRACTIONS.

PART 2 — MISSOURI ITEMIZED DEDUCTIONS — Complete this section only if you itemize deductions on your federal return. Attach a copy of your federal Form 1040 (pages 1 and 2) and federal Schedule A.

Table with 11 rows for itemized deductions including FICA, Railroad retirement tax, Self-employment tax, State and local income taxes, Earnings tax, Net state income taxes, and MISSOURI ITEMIZED DEDUCTIONS.

NOTE: IF LINE 11 IS LESS THAN YOUR FEDERAL STANDARD DEDUCTION, SEE INFORMATION ON PAGE 7.

WORKSHEET FOR PART 2 — STATE AND LOCAL INCOME TAXES, LINE 10

Complete this worksheet only if your federal adjusted gross income from federal Form 1040, Line 37 is more than \$159,950 (\$79,975 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-10 of federal Schedule A instructions).

Worksheet table with 8 rows for calculating state and local income taxes, including amounts from federal Form 1040 and calculations.



MISSOURI DEPARTMENT OF REVENUE  
**MISSOURI INCOME PERCENTAGE**

**2009**  
 FORM  
**MO-NRI**

Attachment Sequence No. 1040-04

**Attach Federal Return. See Instructions and Diagram on page 2.**

**PART A — RESIDENT/NONRESIDENT STATUS — Check your status in the appropriate box below.**

NAME (YOURSELF) Ray J. Johnson		NAME (SPOUSE) Sandra D. Johnson	
ADDRESS 101 Maple Street		ADDRESS 101 Maple Street	
CITY, STATE, ZIP CODE Jefferson City, MO 65101	SOCIAL SECURITY NUMBER 400-00-6100	CITY, STATE, ZIP CODE Jefferson City, MO 65101	SOCIAL SECURITY NUMBER 400-00-6101

**1. NONRESIDENT OF MISSOURI** What was your state of residence during 2009?

**2. PART-YEAR MISSOURI RESIDENT**

a. Indicate the date you were a Missouri resident in 2009.	Date From: 05/01/09	Date To: 12/31/09
b. Indicate other state of residence and date you resided there.	Date From: 01/01/09	Date To: 04/30/09

IL

**3. MILITARY/NONRESIDENT TAX STATUS — Indicate your tax status below and complete Part C—Missouri Income Percentage.**

a. **Missouri Home of Record**   
 I did not at any time during the 2009 tax year maintain a permanent place of abode in Missouri nor did I spend more than 30 days in Missouri during the year. I did maintain a permanent place of abode in the state of \_\_\_\_\_.

b. **Non-Missouri Home of Record**   
 I resided in Missouri during 2009 solely because I was stationed at \_\_\_\_\_ on military orders, my home of record is in the state of \_\_\_\_\_.

**PART B — WORKSHEET FOR MISSOURI SOURCE INCOME**

ADJUSTED GROSS INCOME COMPUTATIONS	FEDERAL FORM 1040A LINE NO.	FEDERAL FORM 1040 LINE NO.	YOURSELF OR ONE INCOME FILER		SPOUSE (ON A COMBINED RETURN)	
			MISSOURI SOURCES		MISSOURI SOURCES	
A. Wages, salaries, tips, etc. ....	7	7	A	36000 00	A	0 00
B. Taxable interest income .....	8a	8a	B	600 00	B	600 00
C. Dividend income .....	9a	9a	C	00	C	00
D. State and local income tax refunds .....	none	10	D	00	D	00
E. Alimony received .....	none	11	E	00	E	00
F. Business income or (loss) .....	none	12	F	00	F	00
G. Capital gain or (loss) .....	10	13	G	00	G	00
H. Other gains or (losses) .....	none	14	H	00	H	00
I. Taxable IRA distributions .....	11b	15b	I	00	I	00
J. Taxable pensions and annuities .....	12b	16b	J	00	J	00
K. Rents, royalties, partnerships, S corporations, trusts, etc. ....	none	17	K	00	K	00
L. Farm income or (loss) .....	none	18	L	00	L	00
M. Unemployment compensation .....	13	19	M	450 00	M	00
N. Taxable social security benefits .....	14b	20b	N	00	N	00
O. Other income .....	none	21	O	00	O	00
P. Total — Add Lines A through O. ....	15	22	P	37,050 00	P	600 00
Q. Less: federal adjustments to income .....	20	36	Q	2050 00	Q	00
R. <b>SUBTOTAL</b> (Line P – Line Q) If no modifications to income, <b>STOP and ENTER this amount on reverse side, Part C, Line 1.</b> ..	21	37	R	35,000 00	R	600 00
S. Missouri modifications — additions to federal adjusted gross income (Missouri source from Form MO-1040, Line 2) .....			S	00	S	00
T. Missouri modifications — subtractions from federal adjusted gross income (Missouri source from Form MO-1040, Line 4) .....			T	420 00	T	00
U. <b>MISSOURI INCOME</b> (Missouri sources). Line R plus Line S, minus Line T. <b>Enter this amount on reverse side, Part C, Line 1.</b> .....			U	34,580 00	U	600 00

**PART C — MISSOURI INCOME PERCENTAGE**

	Yourselves or One Income Filer		Spouse (on a Combined Return)
1. <b>Missouri income</b> — Enter wages, salaries, etc. from Missouri. (You must file a Missouri return if the amount on this line is more than \$600.)	34580:00	1	600:00
2. Taxpayer's total adjusted gross income (from Form MO-1040, Lines 5Y and 5S or from your federal form if you are a military nonresident and you are not required to file a Missouri return).	45250:00	2	4850:00
3. <b>MISSOURI INCOME PERCENTAGE</b> (divide Line 1 by Line 2). If greater than 100%, enter 100%. (Round to a whole percent such as 91% instead of 90.5% and 90% instead of 90.4%. However, if percentage is less than 0.5%, use the exact percentage.) Enter percentage here and on Form MO-1040, Lines 27Y and 27S.	76% %	3	12% %

**INSTRUCTIONS**

**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.

**PART A, LINE 3: MILITARY NONRESIDENT TAX STATUS —**

**MISSOURI HOME OF RECORD** — *If you have a Missouri home of record and you and/or your spouse:*

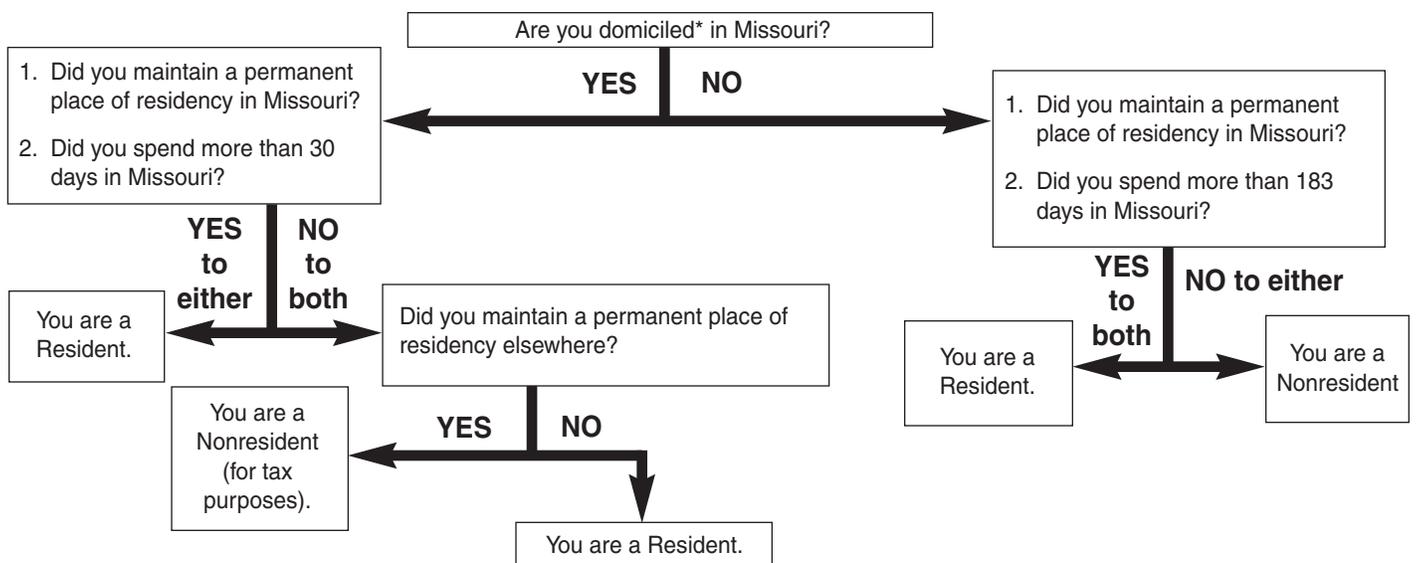
- a) Did not have any Missouri income other than military income, were not in Missouri for more than 30 days, did not maintain a home in Missouri during the year, but did maintain living quarters elsewhere, you qualify as a nonresident for tax purposes. Complete Part A, Line 3 and enter "0" on Part C, Line 1.
- b) Did have Missouri income other than military income, were in Missouri for more than 30 days and/or maintained a home in Missouri during the year you cannot use this form. You must file Form MO-1040 because 100% 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 and/or maintained a home in Missouri during the year you must file Form MO-1040 because 100% of your income is taxable, including your military income. **Do not complete this form.**

**MILITARY NONRESIDENT STATIONED IN MISSOURI** — *If you are a military nonresident, stationed in Missouri and you and/or your spouse:*

- 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 9, as a "Military (nonresident) Subtraction".
- b) **Did not earn non-military income while in Missouri**, complete Part A, Line 3, enter "0" on Part C, Line 1, and your federal adjusted gross income on Part C, Line 2. You are not required to file a Missouri return. Sign this form below and send with your Leave and Earnings Statement (and all Form W-2s) to: Missouri Department of Revenue, P.O. Box 3900, Jefferson City, MO 65105-3900.

**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**



\*Domicile (Home of Record) — The place an individual intends to be his/her permanent home; a place that he/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/her permanent home there. An individual can only have one domicile at a time.

Under penalties of perjury, I declare that I have examined this form 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/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.

SIGNATURE	DATE	SPOUSE'S SIGNATURE	DATE
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MISSOURI DEPARTMENT OF REVENUE  
**INCREASE TO STANDARD DEDUCTION  
 FOR CERTAIN FILERS**

**2009**  
 FORM  
**MO-L**

**You must complete this form if you are increasing your standard deduction by a net disaster loss, state or local real estate taxes, or new motor vehicle taxes. Be sure to attach your federal return and federal Schedule L when you file.**

YOUR NAME Ray L Johnson		YOUR SOCIAL SECURITY NO. 4   0   0   0   0   6   1   0   0	
SPOUSE'S NAME Sandra D Johnson		SPOUSE'S SOCIAL SECURITY NO. 4   0   0   0   0   6   1   0   1	
1. Enter the standard deduction for your filing status: <ul style="list-style-type: none"> <li>• Single or Married Filing Separately - <b>\$5,700</b></li> <li>• Married Filing Combined or Qualifying Widow(er) - <b>\$11,400</b></li> <li>• Head of Household - <b>\$8,350</b></li> <li>• Claimed as a dependent - enter amount from Line 4 of federal Schedule L. . . .</li> </ul>	1.	11,400	00
2. If you are over 65 or blind, enter the amount reported on Line 5 of federal Schedule L . . . . .	2.	0	00
3. Enter the amount of any net disaster loss included in your standard deduction and reported on Line 6 of federal Schedule L. . . . .	3.	0	00
4. Enter the amount of state and local real estate taxes included in your standard deduction and reported on Line 9 of federal Schedule L. . . . .	4.	1,000	00
5. Enter the amount of any new motor vehicle taxes included in your standard deduction and reported on Line 20 of federal Schedule L. . . . .	5.	2,356	00
6. Add the amounts shown on Lines 1 through 5 and report the total here and on Form MO-1040 Line 14, Form MO-1040A Line 6, or Form MO-1040P Line 8. . .	6.	14,756	00

MO-L (11-2009)



MISSOURI DEPARTMENT OF REVENUE  
**INCREASE TO STANDARD DEDUCTION  
 FOR CERTAIN FILERS**

**2009**  
 FORM  
**MO-L**

**You must complete this form if you are increasing your standard deduction by a net disaster loss, state or local real estate taxes, or new motor vehicle taxes. Be sure to attach your federal return and federal Schedule L when you file.**

YOUR NAME		YOUR SOCIAL SECURITY NO.	
SPOUSE'S NAME		SPOUSE'S SOCIAL SECURITY NO.	
1. Enter the standard deduction for your filing status: <ul style="list-style-type: none"> <li>• Single or Married Filing Separately - <b>\$5,700</b></li> <li>• Married Filing Combined or Qualifying Widow(er) - <b>\$11,400</b></li> <li>• Head of Household - <b>\$8,350</b></li> <li>• Claimed as a dependent - enter amount from Line 4 of federal Schedule L. . . .</li> </ul>	1.	00	
2. If you are over 65 or blind, enter the amount reported on Line 5 of federal Schedule L . . . . .	2.	00	00
3. Enter the amount of any net disaster loss included in your standard deduction and reported on Line 6 of federal Schedule L. . . . .	3.	00	00
4. Enter the amount of state and local real estate taxes included in your standard deduction and reported on Line 9 of federal Schedule L. . . . .	4.	00	00
5. Enter the amount of any new motor vehicle taxes included in your standard deduction and reported on Line 20 of federal Schedule L. . . . .	5.	00	00
6. Add the amounts shown on Lines 1 through 5 and report the total here and on Form MO-1040 Line 14, Form MO-1040A Line 6, or Form MO-1040P Line 8. . .	6.	00	00

MO-L (11-2009)