MISSOURI DEPARTMENT OF REVENUE
JEFFERSON CITY, MO 65105-2200

Please place this label in the address area of your return. Do not use this label if it is incorrect. ▶

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Missouri Dept.
of Revenue

MISSOURI
2009 Form MO-1040P

File Electronically!

Last year, more than 1.7 million Missouri income tax returns were filed electronically. See page 2 for details.

Tax Deadline April 15

(For extensions, see page 4.)

Property Tax Credit/ Pension Exemption Short Form

B-1040P

Visit our web site at **www.dor.mo.gov/tax**

MO 860-2953 (10-2009)

ELECTRONIC FILING OPTIONS

Federal/State E-file: Missouri, in cooperation with the Internal Revenue Service (IRS), offers a joint federal/state filing of individual income tax returns. There are two ways that you may e-file your federal and state income tax returns:

1) You can electronically file your federal and state returns online from web sites provided by approved software providers. Many providers offer free filing if you meet certain conditions. A list of approved links can be found at **www.dor.mo.gov/tax**.
2) You can have a tax preparer (if approved by the IRS) electronically file your federal and state returns for you, usually for a fee. A list of approved tax preparers can be found at **www.dor.mo.gov/tax**.

Benefits of Electronic Filing

- ***Convenience:*** You can electronically file 24 hours a day, 7 days a week.
- ***Security:*** Your tax return information is encrypted and transmitted over secure lines to ensure confidentiality.
- ***Accuracy:*** Electronic filed returns have up to 16 percent fewer errors than paper returns.
- ***Direct Deposit:*** You can have your refund direct deposited into your bank account.
- ***Proof of Filing:*** An acknowledgment is issued when your return is received and accepted.

Visit our web site at www.dor.mo.gov/tax

In addition to electronic filing information found on our web site, you can:

- E-mail us
- Get the status of your refund or balance due
- Pay your taxes online
- Get answers to frequently asked questions
- Use our Fill-in Forms that Calculate
- Download Missouri and Federal tax forms

2-D Barcode Returns—If you plan on filing a paper return, you should consider 2-D barcode filing. The software encodes all your tax information into a 2-D barcode, which allows your return to be processed in a fraction of the time it takes to process a traditional paper return. If you use software to prepare your return, check our web site for approved 2-D barcode software companies. Also, check out the Department's fill-in forms that calculate and have a 2-D barcode. **ALL** 2-D barcode returns should be mailed to: **Department of Revenue, P.O. Box 3385, Jefferson City, MO 65105-3385**.

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PLEASE NOTE!

- The maximum income level for residents who own and occupy their home for the **entire year** is $30,000 (after any exemptions).
- The maximum income level for residents who rented or owned their home a portion of the year is $27,500 (after any exemptions).
- The exemption for married filing combined is $4,000 if you own and occupy your home the **entire year.** If you rent the exemption is $2,000.
- The maximum credit for residents who own and occupy their home is $1,100. If you rent the maximum credit is $750.

The Department administers two real estate tax assistance programs for qualified senior citizens and 100 percent disabled individuals, the Missouri Property Tax Credit Claim (MO-PTC) and the Homestead Preservation Credit (HPC). If you own and occupy your home but your income restricts you from qualifying for the MO-PTC, you may be eligible for the HPC. You can only receive ONE of the credits. You should determine which tax credit program is more beneficial to you. For more information regarding the HPC, contact (573) 526-8942 or access **www.dor.mo.gov/tax**.

Do I Have the Correct Tax Book?

You **MAY USE** this tax book to file your 2009 Missouri individual income tax return and claim the property tax credit and/or pension exemption.

You **CANNOT USE** this tax book if you:

- Have income from another state;
- Are filing an amended return;
- Have military pay that is not taxable;
- Have a net operating loss;
- Are a fiscal year filer;
- Have any of the following Missouri modifications:
  a. Positive or negative adjustments from partnerships, fiduciaries, S corporations, or other sources;
  b. Nonqualified distribution received from the Missouri Savings for Tuition Program (MOST) and/or Missouri Higher Education Deposit Program;
  c. Exempt contributions made to or earnings from the Missouri Savings for Tuition Program (MOST) and/or Missouri Higher Education Deposit Program;
  d. Interest from federal exempt obligations;
  e. Interest from state and local obligations;
  f. Capital gain exclusion;
  g. Railroad retirement modifications;
  h. Negative bonus depreciation adjustments;
  i. Enterprise Zone or Rural Empowerment Zone Modification;
  j. Are a nonresident alien;
  k. Are a nonresident stationed in Missouri and you or your spouse earned nonmilitary income while in Missouri; or
  l. Qualified Health Insurance Premiums.
- Claim:
  a. Miscellaneous tax credits (Form MO-TC);
  b. Credit made with the filing of a Form MO-60, Application for Extension of Time to File;
  c. A deduction for other federal tax (from Federal Form 1040, Lines 45, 47, and 58 and any recapture taxes included on Line 60);
  d. A deduction for dependents age 65 or older; or
  e. A healthcare sharing ministry deduction.
- Owe a penalty for underpayment of estimated tax;
- Owe tax on a lump sum distribution included on your Federal Form 1040, Line 44; or
- Owe recapture tax on low income housing credit.

Note: Use Form MO-PTC if you are not required to file an individual income tax return, but you are eligible to file for a Property Tax Credit.

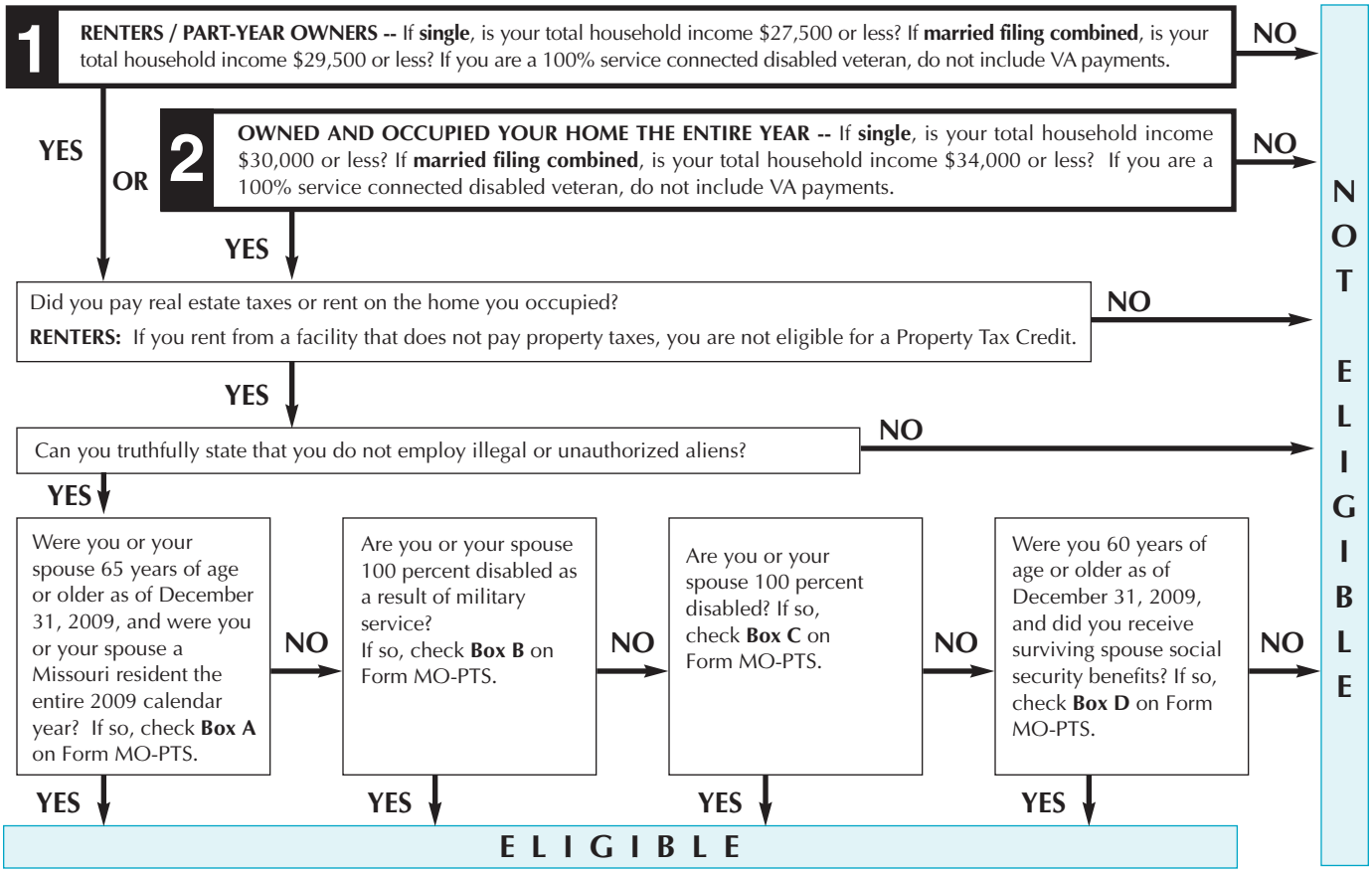
To Obtain Forms

- Access **www.dor.mo.gov/tax.**
- Call the Forms-by-Fax System at (573) 751-4800 from your **fax machine handset.** The system will take you through the steps to fax a copy of the form(s) you need.
- To obtain federal forms you can access the IRS web site at **www.irs.gov**.

AM I ELIGIBLE?

Use this diagram to determine if you or your spouse are eligible to claim the **PROPERTY TAX CREDIT**

START DIAGRAM BY CHOOSING BOX 1 OR BOX 2 AND FOLLOW TO CONCLUSION.



IMPORTANT FILING INFORMATION

This information is for guidance only and does not state the complete law.

Filing Requirements

You do not have to file a Missouri return if you are not required to file a federal return. If you are required to file a federal return, you may not have to file a Missouri return if you:

- are a resident and have less than $1,200 of Missouri adjusted gross income;
- are a nonresident with less than $600 of Missouri income; or
- have Missouri adjusted gross income less than the amount of your standard deduction plus the exemption amount for your filing status.

Note: If you are not required to file a Missouri return, but you received a Form W-2 stating you had Missouri tax withheld, you must file your Missouri return to get a refund of your Missouri withholding. If you are not required to file a Missouri return and you do not anticipate an increase in income, you may change your Form MO W-4 to "exempt" so your employer will not withhold Missouri tax. If you are a nonresident alien, access our web site at **www.dor.mo.gov/tax** for information.

When To File

The 2009 returns are due April 15, 2010.

Extension of Time to File

You are not required to file an extension if you do not expect to owe additional income tax or if you anticipate receiving a refund. If you wish to file a Missouri extension, and do **not** expect to owe Missouri income tax, you may file an extension by filing Form MO-60, Application for Extension of Time to File. An automatic extension of time to file will be granted until October 15, 2010.

If you receive an extension of time to file your federal income tax return, you will automatically be granted an extension of time to file your Missouri income tax return, provided you do not expect to owe any additional Missouri income tax. Attach a copy of your federal extension (Federal Form 4868) with your Missouri income tax return when you file.

If you expect to owe Missouri income tax, file Form MO-60 with your payment by the original due date of return.

Remember: An extension of time to file does not extend the time to pay.

A 5 percent additions to tax will apply if the tax is not paid by the original return's due date, provided your return is filed by the extension date.

Late Filing and Payment

Simple interest is charged on all delinquent taxes. The interest rate will be updated annually and can be found on the Department of Revenue's web site at **www.dor.mo.gov/tax**.

For timely filed returns, an additions to tax charge of 5 percent (of the unpaid tax) is added if the tax is not paid by the return's due date.

For returns not filed by the due date, an additions to tax of 5 percent per month (of the unpaid tax) is added for each month the return is not filed. The additions to tax cannot exceed 25 percent. **Note:** If you file an extension, a 5 percent additions to tax charge will still apply if the tax is not paid by the original return's due date, provided your return is filed by the extension date.

If you are unable to pay the tax owed in full on the due date, please visit the Department of Revenue's web site at **www.dor.mo.gov/tax/personal/individual/** for your payment options.

Where to Mail Your Return

If you are due a **refund** or have **no amount due**, mail your return and all required attachments to:

Department of Revenue
P.O. Box 2800
Jefferson City, MO 65105-2800.

If you have a **balance due**, mail your return, payment, and all required attachments to:

Department of Revenue
P.O. Box 3395
Jefferson City, MO 65105-3395.

ALL 2-D barcode re turns, se e page 2.

Dollars and Cents

Rounding is required on your tax return. Zeros have been placed in the cents column on your return. For 1 cent through 49 cents, round down to the previous whole dollar amount. For 50 cents through 99 cents, round up to the next whole dollar amount.

Example:
Round $32.49 down to $32.00
Round $32.50 up to $33.00

Amended Return

You must use Form MO-1040 (long form) for the year being amended. See information on page 3 on how to obtain Form MO-1040 and instructions.

Fill-in Forms that Calculate

Access **www.dor.mo.gov/tax** to enter your tax information and let us do the math for you. No calculation errors means faster processing. Just print, sign, and mail the return. These forms contain a 2-D barcode at the top right portion of the form. This allows quicker processing of your return.

Missouri Return Inquiry

To check the status of your **current year return** 24 hours a day, please visit our web site: **www.dor.mo.gov/tax** or call our automated individual income tax inquiry line at (573) 526-8299. To obtain the status of your return, you must know the following information: 1) the first social security number on the return; 2) the filing status shown on your return; and 3) the exact amount of the refund or balance due in whole dollars.

Address Change

If you move after filing your return, notify both the post office serving your old address and the **Department of Revenue** of your address change. Address change requests should be mailed to: **Department of Revenue, P.O. Box 2200, Jefferson City, MO 65105-2200.** This will help forward any refund check or correspondence to your new address.

Consumer's Use Tax

Use tax is imposed on the storage, use or consumption of tangible personal property in this state. The state use tax rate is 4.225%. Cities and counties may impose an additional local use tax. Use tax does not apply if the purchase is subject to Missouri sales tax or otherwise exempt. A purchaser is required to file a use tax return if the cumulative purchases subject to use tax exceed $2,000 in a calendar year. You can use the Form 4340, Consumer's Use Tax Return located on page 21, or download a form at www.dor.mo.gov/tax. **The due date for Form 4340 is April 15, 2010.**

Taxpayer Bill of Rights

To obtain a copy of the *Taxpayer Bill of Rights*, access our web site at **www.dor.mo.gov/tax/personal/pubs.htm.**

Filing for Deceased Individuals

Any exsisting POA pending with the Department of Revenue is terminated when the death of the taxpayer is made known to the Department. A new POA (Form 2827) is required after death of the taxpayer before any party may discuss the taxpayer's debt with the Department staff.

If an individual passed away in 2009, a claim may be filed by the surviving spouse if the filing status is "married filing combined" and all other qualifications are met. If there is no surviving spouse, the estate may file the claim.

A copy of the death certificate must be attached and if the check is to be issued in another name, a Federal Form 1310 must also accompany the claim. To obtain Federal Form 1310, see "To Obtain Forms" on page 3 or access **www.irs.gov/formspubs**.

FORM MO-1040P

Information To Complete Form MO-1040P

Name, Address, Etc.

If all information is correct on the preprinted label (if available), attach the label to the Form MO-1040P and print or type your social security number(s) in the spaces provided. If you did not receive a book with a peel-off label, or the label is incorrect, print or type your name(s), address, and social security number(s) in the spaces provided on the return.

If the taxpayer or spouse died in 2009, check the appropriate box.

Enter your county of residence, and the number of the public school district in which you reside. See the school district listing on pages 30 and 31.

Age 62 through 64

If you or your spouse were ages 62, 63, or 64 by December 31, 2009, check the appropriate box as you may qualify for the social security deduction.

65 or Older, Blind, 100 Percent Disabled, Non-obligated Spouse

If you or your spouse were **65 or older** or **blind** and qualified for these deductions on your 2009 federal return, check the appropriate boxes.

You may check the **100 percent disabled** box if you are unable to engage in any substantial gainful activity by reason of any medically determinable physical or mental impairment that can be expected to result in death or has lasted, or can be expected to last, for a continuous period of not less than 12 months.

You may check the **non-obligated spouse** box if your spouse owes the state of Missouri any child support payments, back taxes, student loans, etc., and you do not want your portion of the refund used to pay the amounts owed by your spouse. The Internal Revenue Service (IRS) is not a state agency and debts owed to the IRS are **excluded** from the non-obligated spouse apportionment. The Department of Revenue cannot apportion the Property Tax Credit.

Line 1 — Federal Adjusted Gross Income

If your filing status is "married filing combined," and both spouses are reporting income, use the Worksheet on page 8 to split your income between you and your spouse. The combined income for you and your spouse must equal the total federal adjusted gross income reported on your federal return.

Splitting the income reduces the rate at which your combined incomes are taxed and allows you to claim non-obligated spouse so you will not be held responsible for your spouse's debts to Missouri.

For all other filing statuses, use the chart below.

FEDERAL FORM	LINE
1040	Line 37
1040A	Line 21
1040EZ	Line 4
1040X	Line 1

Line 2 — State Income Tax Refund

Subtract any state income tax refund included in your federal adjusted gross income (Federal Form 1040, Line 10). **Attach a copy of your federal return (pages 1 and 2).**

Line 5 — Income Percentages

Complete the chart below if both spouses have income:

Yourself
Line 3Y_____ divided by
Line 4 _____= _____

Spouse
Line 3S_____ divided by
Line 4 _____= _____

The total entered on Line 5 must equal 100 percent — round to the nearest whole number. **Note:** If one spouse has negative income and the other spouse has positive income (Example: your income is -$15,000 and your spouse's income is $30,000), enter 0% on Line 5Y and 100% on Line 5S.

Line 6 — Filing Status and Exemption Amount

Check the box applicable to your filing status. You must use the same filing status as your federal return with two exceptions:

Box B must be checked if you are claimed as a dependent on another person's federal tax return and you checked either box on Federal Form 1040EZ, Line 5 or you were not allowed to check Box 6a on Federal Forms 1040 or 1040A.

If you checked Box B, enter "0".

Box E may be checked **only if all** of the following apply: a) you checked Box 3 (married filing separate return) on your Federal Form 1040 or 1040A; b) your spouse had no income and is not required to file a federal return; and c) your spouse was claimed as an exemption on your federal return and was not a dependent of someone else. **You must attach a copy of your federal return if you claim this filing status.**

Only one box may be checked on Line 6, Boxes A through G.

Enter on Line 6 the amount of exemption claimed for your filing status on Boxes A through G. The amounts are listed on Form MO-1040P.

Line 7 — Tax From Federal Return

Use the chart below for Federal Form and Line Numbers to locate your tax on your federal return. This amount is limited to $5,000 for single filers and $10,000 for combined filers.

Federal Form	Line Numbers
1040	Line 55 minus Lines 45, 63, 64a, 66, 67, and amounts from Forms 8801 and 8885 on Line 70.
1040A	Line 35 minus Line 40, 41a, 43 and any alternative minimum tax included on Line 28
1040EZ	Line 11 minus Line 8 and 9a.
1040X	Line 8 minus Lines 13 and 14, except amounts from Forms 2439 and 4136.

Do not enter your federal income tax withheld as shown on your Form W-2(s) or federal return.

If you have an earned income credit, you must subtract the credit from the tax on your federal return. If a negative amount is calculated, enter "0".

Line 8 — Standard or Itemized Deduction

Standard Deductions: If you claimed the standard deduction on your federal return, enter the standard deduction amount for your filing status. The amounts are listed on Form MO-1040P, Line 8.

Use the chart below to determine your standard deduction if you or your spouse marked any of the boxes for: 65 or older, blind, claimed as a dependent, or claimed an additional standard deduction on your federal return. If you claimed an additional standard deduction on your federal return, you must complete Form MO-L on page 4 of the MO-1040P, and attach a copy of the Federal Schedule L.

Federal Form	Line Numbers
1040	Line 40a
1040A	Line 24a
1040EZ	*See following note
1040X	Line 2

***Note:** If you filed a Federal Form 1040EZ, and checked one or both boxes on Line 5, refer to the Standard Deduction Worksheet for Dependents. If you did not check either box on Federal Form 1040EZ, Line 5, enter $5,700 if single or $11,400 if married.

Itemized Deductions: If you itemized on your federal return, you may want to itemize on your Missouri return or take the standard deduction, whichever results in a higher deduction. If you were **required** to itemize on your federal return, you must itemize on your Missouri return. To figure your itemized deductions, complete the Form MO-1040P, page 4. **Attach a copy of your federal return (pages 1 and 2) and Federal Schedule A.**

Line 9 — Dependents

Do not include yourself or your spouse as dependents.

Multiply the total number of dependents you claimed on your federal return by $1,200. Only include dependents claimed on Federal Forms 1040A or 1040, Line 6c.

Attach a copy of your federal return (pages 1 and 2).

Line 10 — Pension Exemption

If you received a pension, complete the pension exemption worksheet on Form MO-1040P, page 3 to see how much of your pension may be tax free.

Attach a copy of your federal return (pages 1 and 2) and all Forms 1099(s), 1099-R(s), and W-2P(s).

Line 11 — Long-Term Care Insurance Deduction

If you paid premiums for qualified long-term care insurance in 2009, you may be eligible for a deduction on your Missouri income tax return. Qualified long-term care insurance is defined as insurance coverage for a period of at least 12 months for long-term care expenses should such care become necessary because of chronic health conditions and/or physical disabilities including cognitive impairment or the loss of functional capacity, thus rendering an individual unable to care for themself without the help of another person. Complete the worksheet on page 7 only if you paid premiums for a qualified long-term care insurance policy and the policy is for at least 12 months coverage.

Line 16 — Missouri Tax

If your Missouri taxable income is less than $9,000, use the tax table on Form MO-1040P, page 4 to determine your tax. If your Missouri taxable income is more than $9,000, follow the example below the tax table to calculate the tax.

A separate tax must be computed for you and your spouse.

Line 18 — Missouri Withholding

Include only Missouri withholding as shown on your Form W-2(s), 1099(s), or 1099-R(s). **Do not include withholding for federal taxes, local taxes, city earnings taxes, or another state's withholding. Attach a copy of all Forms W-2(s) and 1099(s).** See Diagram on page 32.

Line 19 — Estimated Tax Payments

Include any estimated tax payments made during 2009 and any overpayment applied from your 2008 Missouri return.

Line 20 — Property Tax Credit

Complete Form MO-PTS to determine the amount of your property tax credit. See Information to Complete Form MO-PTS on pages 23–25.

Line 23 — Apply Overpayment to Next Year's Taxes

You may apply any portion of your refund to next year's taxes.

Line 24 — Trust Funds

You may donate part or all of your overpaid amount or contribute additional payments to any of the trust funds listed on Form MO-1040P and/ or any two additional trust funds.

Additional Trust Funds: If you choose to give to any of the additional trust funds, enter the two-digit code (see next column) in the spaces provided on Line 24. If you want to give to more than two additional trust funds, please submit a contribution directly to the fund. See **www.dor.mo.gov/tax/trustfunds.htm** for additional information.

Trust Funds	*Codes*
American Cancer Society High Plains Division, Inc., Fund	*01*
American Diabetes Association Gateway Area Fund	*02*
American Heart Association Fund	*03*
American Lung Association of Missouri Fund	*04*
Amyotrophic Lateral Sclerosis (ALS—Lou Gehrig's Disease) Fund	*05*
Arthritis Foundation Fund	*09*
Breast Cancer Awareness Fund	*13*
Cervical Cancer Fund	*12*
March of Dimes Fund	*08*
Muscular Dystrophy Association Fund	*07*
National Multiple Sclerosis Society Fund	*10*

The minimum contribution is $2, or $4 if married filing combined for the following trust funds: Children's Trust Fund, Veterans Trust Fund, Elderly Home Delivered Meals Fund, and Missouri National Guard Fund.

The minimum contribution is $1, or $2 if married filing combined for the following trust funds: Workers Memorial Fund, Childhood Lead Testing Fund, Military Family Relief Fund, and General Revenue Fund.

The following has no minimum contribution and is an irrevocable trust fund: Cervical Cancer Fund

The minimum contribution is $1, not to exceed $200, for the following irrevocable trust funds: American Cancer, American Diabetes, Association Gateway Area Trust Fund, American Heart Association Trust Fund, American Lung Association of Missouri Trust Fund, ALS Lou Gehrig's Disease Trust Fund, Arthritis Foundation Trust Fund, March of Dimes Trust Fund, Muscular Dystrophy Association Trust Fund, and National Multiple Sclerosis Society Trust Fund.

Line 25 — Refund

Subtract Lines 23 and 24 from Line 22 and enter on Line 25.

Note: If you have any other liability due the state of Missouri, such as child support payments or a debt with the Internal Revenue Service, your income tax refund may be applied to that liability in accordance with Section 143.781, RSMo. Your property tax credit may be applied to any property tax credit or individual income tax liability pursuant to Section 143.782, RSMo. You will be notified if your refund is offset against any debt(s).

Line 26 — Amount Due

Payments must be postmarked by April 15, 2010, to avoid interest and late payment charges. The Department of Revenue offers several payment options.

Check or money order: Attach a check or money order (U.S. funds only), payable to Missouri Department of Revenue. Checks will be cashed upon receipt. **Do not postdate.** The Department of Revenue may electronically resubmit checks returned for insufficient or uncollected funds.

If you mail your payment after your return is filed, attach your payment to the Form 1040V found on page 21.

Electronic Bank Draft (E-Check): By entering your bank routing number, checking account number, and your next check number, you may pay online at **www.dor.mo.gov/tax/personal,** or by calling (888) 929-0513. There will be a $.60 handling fee per filing period/ transaction to use this service.

Credit Card: The Department accepts MasterCard, Discover, Visa, and American Express. You may pay online at **www.dor.mo.gov/ tax/personal,** or by calling (888) 929-0513. The convenience fees listed on the next page will be charged to your account for processing credit card payments:*

Worksheet for Long-Term Care Insurance Deduction

A. Enter the amount paid for qualified long-term care insurance policy. . . . . A) $_____
If you itemized on your federal return and your federal itemized deductions included medical expenses, go to Line B. If not, skip to H.

B. Enter the amount from Federal Schedule A, Line 4. . . . . B) $_____

C. Enter the amount from Federal Schedule A, Line 1. . . . . C) $_____

D. Enter the amount of qualified long-term care included on Line C. . . . . D) $_____

E. Subtract Line D from Line C. . . . . E) $_____

F. Subtract Line E from Line B. **If amount is less than zero, enter "0".** . . . . . F) $_____

G. Subtract Line F from Line A. . . . . G) $_____

H. Enter Line G (or Line A if you did not have to complete Lines B through G) on Form MO-1040P, Line 11

Attach a copy of your Federal Form 1040 (pages 1 and 2) and Federal Schedule A (if you itemized your deductions).

Amount of Tax Paid	Convenience Fee
$0.00–$33.00	$1.00
$33.01–$100.00	3.00%
$100.01–$250.00	2.95%
$250.01–$500.00	2.85%
$500.01–$750.00	2.85%
$750.01–$1,000.00	2.80%
$1,000.01–$1,500.00	2.75%
$1,500.01–$2,000.00	2.70%
$2,000.01 or more	2.60%

***Note:** The handling and/or convenience fees included in these transactions are being paid to the third party vendor, **not** to the Missouri Department of Revenue. By accessing this payment system, the user will be leaving Missouri's web site and connecting to the web site of the third party vendor which is a secure and confidential web site.

Sign Return

You must sign Form MO-1040P, both spouses must sign if you are filing a combined return. If you use a paid preparer, the preparer must also sign the return.

If you wish to authorize the Director of Revenue or delegate, to release information regarding your tax account to your preparer, or any member of the preparer's firm, indicate "yes" by checking the appropriate box.

Attachments

- **All Forms W-2(s) and 1099(s)**
- **Copy of federal return, pages 1 and 2 and Federal Schedule A**
  - **—if you itemized your deductions on Line 8, Missouri Itemized Deductions**
  - **—if you have an entry on Line 11, Long-term Care Insurance Deduction**
- **A copy of paid Property Tax Receipt(s), rent receipts, or statement from your landlord if you claimed the Property Tax Credit on Line 20**
- **Documentation (a copy of Form SSA-1099, letter from Social Security Administration, letter from Department of Veterans Affairs) of the applicable qualification under which you are filing the Form MO-PTS**
- **Federal Form 1310 and a copy of death certificate if filing for a deceased individual**

Mail Form MO-1040P, Attachments, and Payment (if necessary) to:

Refund or no amount due —
Department of Revenue,
P.O. Box 2800, Jefferson City, MO 65105-2800

Balance due —
Department of Revenue,
P.O. Box 3395, Jefferson City, MO 65105-3395

ALL 2-D barcode returns should be mailed to: **Department of Revenue, P.O. Box 3385, Jefferson City, MO 65105-3385.**

Splitting Your Income

Missouri law requires a combined return for spouses filing together. A combined return means taxpayers are required to split their total federal adjusted gross income (including other state income) between spouses when beginning the Missouri return.

Splitting the income can be as easy as adding up your separate Form W-2s and 1099s. Or it may require more calculating by allocating to each spouse the percentage of ownership in jointly held property, such as businesses, farm operations, dividends, interest, rent, and capital gains or losses. State refunds should be split based on each spouse's 2008 Missouri tax withheld, less each spouse's 2008 tax liability. The result should be each spouse's portion of the 2008 refund. Taxable social security benefits must be allocated by each spouse's share of the benefits received for the year.

The worksheet below lists income that is included on your federal return, along with federal line references. Find the lines that apply to your federal return, split the income between you and your spouse, and enter the amounts on the worksheet. When you have completed the worksheet, transfer the amounts from Line 18 to Form MO-1040P, Lines 1Y and 1S.

Note: Remember, the incomes listed separately on Line 18 of this worksheet must equal your total federal adjusted gross income when added together.

Adjusted Gross Income Worksheet for Combined Return	Federal Form 1040EZ Line Number	Federal Form 1040A Line Number	Federal Form 1040 Line Number		Y — Yourself		S — Spouse
1. Wages, salaries, tips, etc.	1	7	7	1	00	1	00
2. Taxable interest income	2	8a	8a	2	00	2	00
3. Dividend income	none	9a	9a	3	00	3	00
4. State and local income tax refunds	none	none	10	4	00	4	00
5. Alimony received	none	none	11	5	00	5	00
6. Business income or (loss)	none	none	12	6	00	6	00
7. Capital gain or (loss)	none	10	13	7	00	7	00
8. Other gains or (losses)	none	none	14	8	00	8	00
9. Taxable IRA distributions	none	11b	15b	9	00	9	00
10. Taxable pensions and annuities	none	12b	16b	10	00	10	00
11. Rents, royalties, partnerships, S corporations, trusts, etc.	none	none	17	11	00	11	00
12. Farm income or (loss)	none	none	18	12	00	12	00
13. Unemployment compensation	3	13	19	13	00	13	00
14. Taxable social security benefits	none	14b	20b	14	00	14	00
15. Other income	none	none	21	15	00	15	00
16. Total (add Lines 1 through 15)	4	15	22	16	00	16	00
17. Less: federal adjustments to income	none	20	36	17	00	17	00
18. Federal adjusted gross income (Line 16 less Line 17) Enter amounts here and on Line 1 of Form MO-1040P	4	21	37	18	00	18	00

MISSOURI INDIVIDUAL INCOME TAX RETURN AND PROPERTY TAX CREDIT CLAIM/PENSION EXEMPTION—SHORT FORM

2009 FORM MO-1040P

LAST NAME	FIRST NAME	MIDDLE INITIAL	DECEASED 2009 ☐	SOCIAL SECURITY NUMBER ___ ___ ___ - ___ ___ - ___ ___ ___ ___	SOFTWARE VENDOR CODE (Assigned by DOR)
SPOUSE'S LAST NAME	FIRST NAME	MIDDLE INITIAL	DECEASED 2009 ☐	SPOUSE'S SOCIAL SECURITY NUMBER ___ ___ ___ - ___ ___ - ___ ___ ___ ___	000

IN CARE OF NAME (ATTORNEY, EXECUTOR, PERSONAL REPRESENTATIVE, ETC.)	COUNTY OF RESIDENCE	SCHOOL DISTRICT NO. (PG. 30, 31)

PRESENT ADDRESS (INCLUDE APARTMENT NO. OR RURAL ROUTE)	APT. NUMBER	CITY, TOWN, OR POST OFFICE, STATE, AND ZIP CODE

PLEASE CHECK THE APPROPRIATE BOXES THAT APPLY TO YOURSELF OR YOUR SPOUSE.

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

You may contribute to any one or all of the trust funds that are listed to the right. Place the total amount contributed on Line 24. See the instructions for a list of Trust Fund Codes.

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

INCOME

		Yourself	Spouse
1. **Federal Adjusted Gross Income** from your 2009 federal return (See worksheet on page 8.)	1	00	00
2. Any state income tax refund included in your 2009 federal income	2	– 00	– 00
3. Subtract Line 2 from Line 1. This is your Missouri adjusted gross income.	3	= 00	= 00
4. **TOTAL MISSOURI ADJUSTED GROSS INCOME** — Add both numbers on Line 3 and enter here.	4	00	
5. Income percentages — Divide Line 3 by Line 4 for both you and your spouse. (The total of the two must equal 100%. Round to the nearest whole number.)	5	%	%

DEDUCTIONS AND TAXABLE INCOME

6. Mark your filing status box below and enter the appropriate exemption amount on Line 6.

- ☐ A. Single — **$2,100 (See Box B before checking.)**
- ☐ B. Claimed as a dependent on another person's federal tax return — **$0.00**
- ☐ C. Married filing joint federal & combined Missouri — **$4,200**
- ☐ D. Married filing separate — **$2,100**
- ☐ E. Married filing separate (spouse NOT filing) — **$4,200**
- ☐ F. Head of household — **$3,500**
- ☐ G. Qualifying widow(er) with dependent child — **$3,500**

Line 6: 00

7. Tax from federal return (Do not enter amount from your Form W-2(s)— **NOT** federal tax withheld.) ____ 00 → Single—maximum of $5,000; Married filing combined—maximum of $10,000 . . . Line 7: + 00

8. Missouri Standard or Itemized Deduction

Taxpayers Under Age 65
Single **$5,700**
Married Filing Combined **$11,400**
Married Filing Separate **$5,700**
Head of Household **$8,350**
Qualifying Widow(er) **$11,400**

Taxpayers Age 65 or Older
Single **$7,100**
Married Filing Combined and **YOU** are Age 65 or Older **$12,500**
Married Filing Combined and You and Your Spouse are **BOTH** Age 65 or Older **$13,600**
Married Filing Separate **$6,800**
Head of Household **$9,750**
Qualifying Widow(er) **$12,500**

If blind, claimed as a dependent, or if you claimed an additional standard deduction on your federal return, see your federal return, page 6 of the instructions, or page 4 of the Form MO-1040P. If itemizing, see page 4 of the Form MO-1040P. . . . Line 8: + 00

9. Number of dependents from Federal Form 1040 OR 1040A, Line 6c **(DO NOT INCLUDE YOURSELF OR SPOUSE.)** ☐ x $1,200 . . . Line 9: + 00

10. Pension exemption (Complete worksheet on page 3 of Form MO-1040P.) **Attach worksheet on page 3, a copy of federal return, Form W-2P(s), and/or Form 1099-R(s).** . . . Line 10: + 00

11. Long-term care insurance deduction . . . Line 11: + 00

12. **TOTAL DEDUCTIONS** — Add Lines 6 through 11. . . . Line 12: = 00

13. **Missouri Taxable Income** — Subtract Line 12 (Total Deductions) from Line 4 (Total Missouri Income) and enter here. . . . Line 13: 00

CAUTION!

See Page 6, Line 7.

If 65 or older and/or blind the appropriate boxes must be checked above.

Do not include yourself or your spouse.

For Privacy Notice, see page 32 of the instructions.

TAXES

			Yourself	Spouse
14. Total Missouri taxable amount from Line 13	14			
15. Multiply Line 14 by the percentages you determined on Line 5. Do this for you and your spouse.	15			
16. Use the tax table on page 4 of Form MO-1040P to figure the tax on amounts from Line 15 for you and your spouse.	16			
17. **TOTAL TAXES** — Add your tax and your spouse's tax from Line 16.	17			

PAYMENTS/CREDITS

18. Missouri withholding for you and your spouse from your Forms W-2(s) and 1099(s). **Attach copies of Forms W-2(s) and 1099(s).**	18	
19. Any Missouri estimated tax payments for 2009 (Be sure to include any amount of your 2008 overpayment credited to your 2009 Missouri tax return.)	19	
CAUTION! **Attach Form MO-PTS.** 20. **PROPERTY TAX CREDIT** — Enter amount from Form MO-PTS, Line 14. **Attach Form MO-PTS.**	20	
21. **TOTAL PAYMENTS AND CREDITS** Add Lines 18, 19, and 20 and enter amount here.	21	

PAYMENTS/REFUND

22. If amount of **TOTAL PAYMENTS AND CREDITS** (Line 21) is larger than amount of **TOTAL TAXES** (Line 17), enter the difference here. You have **overpaid**. If not, enter the amount on Line 26.	22	
23. Enter the amount from Line 22 you want applied to **next year's** taxes.	23	

24. You may donate part of your refund or contribute additional payments to any or all of the trust funds listed to the right. Please indicate your choices and the amount of your donations for each fund in the appropriate boxes.

Children's	Veterans	Elderly Home Delivered Meals	Missouri National Guard	Workers' Memorial	Childhood Lead Testing	Missouri Military Family Relief	General Revenue	After School Retreat	Addl. Trust Fund Code (See Instr.)	Addl. Trust Fund Code (See Instr.)
24										

MAIL TO

25. Subtract Lines 23 and 24 from Line 22 and enter here. This is your refund. **Sign below and mail to: Department of Revenue, P.O. Box 2800, Jefferson City, MO 65105-2800. REFUND**	25	
26. If Line 21 is less than Line 17, enter the difference here. You have an amount due. **Sign below and mail to: Department of Revenue, P.O. Box 3395, Jefferson City, MO 65105-3395. AMOUNT DUE**	26	

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.

SIGNATURE

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. ☐ YES ☐ NO

E-MAIL ADDRESS	PREPARER'S PHONE NUMBER
	( )

SIGNATURE	DATE	PREPARER'S SIGNATURE	FEIN, SSN, OR PTIN
X			
SPOUSE'S SIGNATURE	DAYTIME TELEPHONE	PREPARER'S ADDRESS AND ZIP CODE	DATE
	( )		

IF YOU CLAIM A PENSION OR SOCIAL SECURITY/SOCIAL SECURITY DISABILITY EXEMPTION, YOU MUST ATTACH A COPY OF YOUR FEDERAL RETURN (PAGES 1 AND 2) AND 1099-R(S), AND/OR SSA-1099(S).

PUBLIC PENSION CALCULATION — Public pensions are pensions received from any federal, state, or local government.

SECTION A

1. Enter your Missouri Adjusted Gross Income from Form MO-1040P, Line 4	1		00			
2. Enter your **taxable** social security benefits from federal Form 1040A, Line 14b or federal Form 1040, Line 20b	2		00			
3. Subtract Line 2 from Line 1	3		00			
4. Select the appropriate filing status and enter amount on Line 4. Married filing combined - $100,000; Single, Head of Household, Married Filing Separate, and Qualifying Widow - $85,000	4		00			
5. Subtract Line 4 from Line 3 and enter on Line 5. If Line 4 is greater than Line 3, enter $0	5		00			
	Y - YOURSELF			**S - SPOUSE**		
6. Enter taxable pension for each spouse from public sources from federal Form 1040A, Line 12b or federal Form 1040, Line 16b (public pensions and pensions from other than private sources)	6Y		00	6S		00
7. Multiply Line 6 by 50%	7Y		00	7S		00
8. If amount on Line 7 is greater than $33,703 (maximum social security benefit) enter $33,703. If amount on Line 7 is less than $33,703, enter amount from Line 7	8Y		00	8S		00
9. Enter the amount from Line 6 or $6,000, whichever is less	9Y		00	9S		00
10. Enter the amount from Line 8 or Line 9, whichever is greater	10Y		00	10S		00
11. If you received taxable social security and are claiming a social security exemption, complete Lines 1 through 8 of Part 3 of the MO-A, Section C (social security or social security disability calculation) and enter the amount(s) from Line(s) 6y and 6s here. See instructions if Line 3 of Section C is more than $0	11Y		00	11S		00
12. Subtract Line 11 from Line 10. If Line 11 is greater than Line 10, enter $0	12Y		00	12S		00
13. Add amounts on Lines 12y and 12s	13					00
14. Total Public Pension, subtract Line 5, from Line 13. If Line 5 is greater than Line 13, enter $0	14					00

PRIVATE PENSION CALCULATION — Private pensions are annuities, pensions, 401(K) plans, deferred compensation plans, self-employed retirement plans, and IRA's funded by a private source.

SECTION B

1. Enter your Missouri Adjusted Gross Income from Form MO-1040P, Line 4	1					00
2. Enter your **taxable** social security benefits from federal Form 1040A, Line 14b or federal Form 1040, Line 20b	2					00
3. Subtract Line 2 from Line 1	3					00
4. Select the appropriate filing status and enter the amount on Line 4: Married filing combined: $32,000; Single, Head of Household and Qualifying Widower: $25,000; Married Filing Separate: $16,000	4					00
5. Subtract Line 4 from Line 3. If Line 4 is greater than Line 3, enter $0	5					00
	Y - YOURSELF			**S - SPOUSE**		
6. Enter **taxable** pension for each spouse from **private sources** from federal Form 1040A, Lines 11b and 12b, or federal Form 1040, Lines 15b and 16b.	6Y		00	6S		00
7. Enter the amounts from Line 6Y and 6S or $6,000, whichever is less	7Y		00	7S		00
8. Add Lines 7Y and 7S	8					00
9. **Total private pension**, subtract Line 5 from Line 8. If Line 5 is greater than Line 8, enter $0	9					00

SOCIAL SECURITY OR SOCIAL SECURITY DISABILITY CALCULATION — To be eligible for social security deduction you must be 62 years of age by December 31 and have marked the 62 and older box on page 1 of Form MO-1040P. Age limit does not apply to social security disability deduction.

SECTION C

1. Enter your Missouri Adjusted Gross Income from Form MO-1040P, Line 4	1					00
2. Select the appropriate filing status and enter the amount on Line 2. Married filing combined - $100,000 Single, Head of Household, Married Filing Separate, and Qualifying Widower - $85,000	2					00
3. Subtract Line 2 from Line 1 and enter on Line 3. If Line 2 is greater than Line 1, enter $0	3					00
	Y - YOURSELF			**S - SPOUSE**		
4. Enter **taxable** social security benefits for each spouse from federal Form 1040A, Line 14b or federal Form 1040, Line 20b	4Y		00	4S		00
5. Enter **taxable** social security **disability** benefits for each spouse from federal Form 1040A, Line 14b or federal Form 1040, Line 20b.	5Y		00	5S		00
6. Multiply Line 4 or Line 5 by 50%.	6Y		00	6S		00
7. Add Lines 6Y and 6S.	7					00
8. **Total social security/social security disability**, subtract Line 3 from Line 7. If Line 3 is greater than Line 7, enter $0.	8					00

TOTAL PENSION AND SOCIAL SECURITY / SOCIAL SECURITY DISABILITY EXEMPTION

Total Pension Exemption and Social Security / Social Security Disability Exemption. Add Line 14 (Section A), Line 9 (Section B), and Line 8 (Section C) and enter here and on Form MO-1040P, Line 10	**TOTAL EXEMPTION**		00

MISSOURI ITEMIZED DEDUCTIONS

- **Complete this section only if you itemized deductions on your federal return. (See information on page 6.)**
- **Attach a copy of your Federal Form 1040 (pages 1 and 2) and Federal Schedule A.**

1.	Total federal itemized deductions from Federal Form 1040, Line 40a			1	00
2.	2009 (FICA) — yourself — Social security $ _____ + Medicare $ _____			2	00
3.	2009 (FICA) — spouse — Social security $ _____ + Medicare $ _____			3	00
4.	2009 Railroad retirement tax — yourself (Tier I and Tier II) $ _____ + Medicare $ _____			4	00
5.	2009 Railroad retirement tax — spouse (Tier I and Tier II) $ _____ + Medicare $ _____			5	00
6.	2009 Self-employment tax — Amount from Federal Form 1040, Line 27			6	00
7.	TOTAL — Add Lines 1 through 6.			7	00
8.	State and local income taxes — See instructions.	8	00		
9.	Earnings taxes included in Line 8 — See instructions.	9	00		
10.	Net state income taxes — Subtract Line 9 from Line 8.			10	00
11.	MISSOURI ITEMIZED DEDUCTIONS — Subtract Line 10 from Line 7. Enter here and on Form MO-1040P, Line 8.			11	00

NOTE: IF LINE 11 IS LESS THAN YOUR FEDERAL STANDARD DEDUCTION, SEE INFORMATION ON PAGE 6.

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.

1.	Enter the standard deduction for your filing status: • Single or Married Filing Separately - **$5,700** • Married Filing Combined or Qualifying Widow(er) - **$11,400** • Head of Household - **$8,350** • Claimed as a dependent - enter amount from Line 4 of federal Schedule L.	1	00
2.	If you are over 65 or blind, enter the amount reported on Line 5 of federal Schedule L..	2	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
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
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
6.	Add the amounts shown on Lines 1 through 5 and report the total here and on Form MO-1040P Line 8.	6	00

2009 TAX TABLE

If Line 15 is At least	But less than	Your tax is	If Line 15 is At least	But less than	Your tax is	If Line 15 is At least	But less than	Your tax is	If Line 15 is At least	But less than	Your tax is	If Line 15 is At least	But less than	Your tax is	If Line 15 is At least	But less than	Your tax is
0	100	$ 0	1,500	1,600	$ 26	3,000	3,100	$ 62	4,500	4,600	$109	6,000	6,100	$167	7,500	7,600	$238
100	200	2	1,600	1,700	28	3,100	3,200	65	4,600	4,700	113	6,100	6,200	172	7,600	7,700	243
200	300	4	1,700	1,800	30	3,200	3,300	68	4,700	4,800	116	6,200	6,300	176	7,700	7,800	248
300	400	5	1,800	1,900	32	3,300	3,400	71	4,800	4,900	120	6,300	6,400	181	7,800	7,900	253
400	500	7	1,900	2,000	34	3,400	3,500	74	4,900	5,000	123	6,400	6,500	185	7,900	8,000	258
500	600	8	2,000	2,100	36	3,500	3,600	77	5,000	5,100	127	6,500	6,600	190	8,000	8,100	263
600	700	10	2,100	2,200	39	3,600	3,700	80	5,100	5,200	131	6,600	6,700	194	8,100	8,200	268
700	800	11	2,200	2,300	41	3,700	3,800	83	5,200	5,300	135	6,700	6,800	199	8,200	8,300	274
800	900	13	2,300	2,400	44	3,800	3,900	86	5,300	5,400	139	6,800	6,900	203	8,300	8,400	279
900	1,000	14	2,400	2,500	46	3,900	4,000	89	5,400	5,500	143	6,900	7,000	208	8,400	8,500	285
1,000	1,100	16	2,500	2,600	49	4,000	4,100	92	5,500	5,600	147	7,000	7,100	213	8,500	8,600	290
1,100	1,200	18	2,600	2,700	51	4,100	4,200	95	5,600	5,700	151	7,100	7,200	218	8,600	8,700	296
1,200	1,300	20	2,700	2,800	54	4,200	4,300	99	5,700	5,800	155	7,200	7,300	223	8,700	8,800	301
1,300	1,400	22	2,800	2,900	56	4,300	4,400	102	5,800	5,900	159	7,300	7,400	228	8,800	8,900	307
1,400	1,500	24	2,900	3,000	59	4,400	4,500	106	5,900	6,000	163	7,400	7,500	233	8,900	9,000	312
															9,000		315

PLUS 6% of excess over $9,000

For assistance calculating your tax, go to www.dor.mo.gov/tax and select the Tax Calculator.

Tax on the first $9,000 of taxable income is $315. Tax on the income over $9,000 is calculated at 6%. Example: If Line 15 of the Missouri return is $12,000, then the Missouri tax is $315 + $180 (6% of $3,000) = $495.
NOTE: Make sure **$315** is included in your calculation of tax on taxable income over $9,000.

MISSOURI INDIVIDUAL INCOME TAX RETURN AND PROPERTY TAX CREDIT CLAIM/PENSION EXEMPTION—SHORT FORM

2009 FORM MO-1040P

LAST NAME	FIRST NAME	MIDDLE INITIAL	DECEASED 2009 ☐	SOCIAL SECURITY NUMBER ___ ___ ___ - ___ ___ - ___ ___ ___ ___	SOFTWARE VENDOR CODE (Assigned by DOR)
SPOUSE'S LAST NAME	FIRST NAME	MIDDLE INITIAL	DECEASED 2009 ☐	SPOUSE'S SOCIAL SECURITY NUMBER ___ ___ ___ - ___ ___ - ___ ___ ___ ___	000

IN CARE OF NAME (ATTORNEY, EXECUTOR, PERSONAL REPRESENTATIVE, ETC.)	COUNTY OF RESIDENCE	SCHOOL DISTRICT NO. (PG. 30, 31)

PRESENT ADDRESS (INCLUDE APARTMENT NO. OR RURAL ROUTE)	APT. NUMBER	CITY, TOWN, OR POST OFFICE, STATE, AND ZIP CODE

PLEASE CHECK THE APPROPRIATE BOXES THAT APPLY TO YOURSELF OR YOUR SPOUSE.

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

You may contribute to any one or all of the trust funds that are listed to the right. Place the total amount contributed on Line 24. See the instructions for a list of Trust Fund Codes.

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

INCOME

		Yourself	Spouse
1. **Federal Adjusted Gross Income** from your 2009 federal return (See worksheet on page 8.)	1	00	00
2. Any state income tax refund included in your 2009 federal income	2	– 00	– 00
3. Subtract Line 2 from Line 1. This is your Missouri adjusted gross income.	3	= 00	= 00
4. **TOTAL MISSOURI ADJUSTED GROSS INCOME** — Add both numbers on Line 3 and enter here.	4	00	
5. Income percentages — Divide Line 3 by Line 4 for both you and your spouse. (The total of the two must equal 100%. Round to the nearest whole number.)	5	%	%

DEDUCTIONS AND TAXABLE INCOME

6. Mark your filing status box below and enter the appropriate exemption amount on Line 6.

- ☐ A. Single — **$2,100 (See Box B before checking.)**
- ☐ B. Claimed as a dependent on another person's federal tax return — **$0.00**
- ☐ C. Married filing joint federal & combined Missouri — **$4,200**
- ☐ D. Married filing separate — **$2,100**
- ☐ E. Married filing separate (spouse NOT filing) — **$4,200**
- ☐ F. Head of household — **$3,500**
- ☐ G. Qualifying widow(er) with dependent child — **$3,500**

Line 6: 00

7. Tax from federal return (Do not enter amount from your Form W-2(s)— **NOT** federal tax withheld.) ____ 00 → Single—maximum of $5,000; Married filing combined—maximum of $10,000 . . . Line 7: + 00

8. Missouri Standard or Itemized Deduction

Taxpayers Under Age 65
Single **$5,700**
Married Filing Combined **$11,400**
Married Filing Separate **$5,700**
Head of Household **$8,350**
Qualifying Widow(er) **$11,400**

Taxpayers Age 65 or Older
Single **$7,100**
Married Filing Combined and **YOU** are Age 65 or Older **$12,500**
Married Filing Combined and You and Your Spouse are **BOTH** Age 65 or Older **$13,600**
Married Filing Separate **$6,800**
Head of Household **$9,750**
Qualifying Widow(er) **$12,500**

If blind, claimed as a dependent, or if you claimed an additional standard deduction on your federal return, see your federal return, page 6 of the instructions, or page 4 of the Form MO-1040P. If itemizing, see page 4 of the Form MO-1040P. . . . Line 8: + 00

9. Number of dependents from Federal Form 1040 OR 1040A, Line 6c **(DO NOT INCLUDE YOURSELF OR SPOUSE.)** ☐ x $1,200 . . . Line 9: + 00

10. Pension exemption (Complete worksheet on page 3 of Form MO-1040P.) **Attach worksheet on page 3, a copy of federal return, Form W-2P(s), and/or Form 1099-R(s).** . . . Line 10: + 00

11. Long-term care insurance deduction . . . Line 11: + 00

12. **TOTAL DEDUCTIONS** — Add Lines 6 through 11. . . . Line 12: = 00

13. **Missouri Taxable Income** — Subtract Line 12 (Total Deductions) from Line 4 (Total Missouri Income) and enter here. . . . Line 13: 00

CAUTION!

See Page 6, Line 7.

If 65 or older and/or blind the appropriate boxes must be checked above.

Do not include yourself or your spouse.

For Privacy Notice, see page 32 of the instructions.

TAXES

			Yourself	Spouse
14. Total Missouri taxable amount from Line 13	14			
15. Multiply Line 14 by the percentages you determined on Line 5. Do this for you and your spouse.	15			
16. Use the tax table on page 4 of Form MO-1040P to figure the tax on amounts from Line 15 for you and your spouse.	16			
17. **TOTAL TAXES** — Add your tax and your spouse's tax from Line 16.	17			

PAYMENTS/CREDITS

18. Missouri withholding for you and your spouse from your Forms W-2(s) and 1099(s). **Attach copies of Forms W-2(s) and 1099(s).**	18	
19. Any Missouri estimated tax payments for 2009 (Be sure to include any amount of your 2008 overpayment credited to your 2009 Missouri tax return.)	19	
CAUTION! **Attach Form MO-PTS.** 20. **PROPERTY TAX CREDIT** — Enter amount from Form MO-PTS, Line 14. **Attach Form MO-PTS.**	20	
21. **TOTAL PAYMENTS AND CREDITS** Add Lines 18, 19, and 20 and enter amount here.	21	

PAYMENTS/REFUND

22. If amount of **TOTAL PAYMENTS AND CREDITS** (Line 21) is larger than amount of **TOTAL TAXES** (Line 17), enter the difference here. You have **overpaid**. If not, enter the amount on Line 26.	22	
23. Enter the amount from Line 22 you want applied to **next year's** taxes.	23	

24. You may donate part of your refund or contribute additional payments to any or all of the trust funds listed to the right. Please indicate your choices and the amount of your donations for each fund in the appropriate boxes.

Children's	Veterans	Elderly Home Delivered Meals	Missouri National Guard	Workers' Memorial	Childhood Lead Testing	Missouri Military Family Relief	General Revenue	After School Retreat	Addl. Trust Fund Code (See Instr.)	Addl. Trust Fund Code (See Instr.)
24										

MAIL TO

25. Subtract Lines 23 and 24 from Line 22 and enter here. This is your refund. **Sign below and mail to: Department of Revenue, P.O. Box 2800, Jefferson City, MO 65105-2800. REFUND**	25	
26. If Line 21 is less than Line 17, enter the difference here. You have an amount due. **Sign below and mail to: Department of Revenue, P.O. Box 3395, Jefferson City, MO 65105-3395. AMOUNT DUE**	26	

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.

SIGNATURE

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. ☐ YES ☐ NO

E-MAIL ADDRESS	PREPARER'S PHONE NUMBER
	( )

SIGNATURE	DATE	PREPARER'S SIGNATURE	FEIN, SSN, OR PTIN
X			
SPOUSE'S SIGNATURE	DAYTIME TELEPHONE	PREPARER'S ADDRESS AND ZIP CODE	DATE
	( )		

IF YOU CLAIM A PENSION OR SOCIAL SECURITY/SOCIAL SECURITY DISABILITY EXEMPTION, YOU MUST ATTACH A COPY OF YOUR FEDERAL RETURN (PAGES 1 AND 2) AND 1099-R(S), AND/OR SSA-1099(S).

PUBLIC PENSION CALCULATION — Public pensions are pensions received from any federal, state, or local government.

SECTION A

1. Enter your Missouri Adjusted Gross Income from Form MO-1040P, Line 4	1		00			
2. Enter your **taxable** social security benefits from federal Form 1040A, Line 14b or federal Form 1040, Line 20b	2		00			
3. Subtract Line 2 from Line 1	3		00			
4. Select the appropriate filing status and enter amount on Line 4. Married filing combined - $100,000; Single, Head of Household, Married Filing Separate, and Qualifying Widow - $85,000	4		00			
5. Subtract Line 4 from Line 3 and enter on Line 5. If Line 4 is greater than Line 3, enter $0	5		00			
	Y - YOURSELF			**S - SPOUSE**		
6. Enter taxable pension for each spouse from public sources from federal Form 1040A, Line 12b or federal Form 1040, Line 16b (public pensions and pensions from other than private sources)	6Y		00	6S		00
7. Multiply Line 6 by 50%	7Y		00	7S		00
8. If amount on Line 7 is greater than $33,703 (maximum social security benefit) enter $33,703. If amount on Line 7 is less than $33,703, enter amount from Line 7	8Y		00	8S		00
9. Enter the amount from Line 6 or $6,000, whichever is less	9Y		00	9S		00
10. Enter the amount from Line 8 or Line 9, whichever is greater	10Y		00	10S		00
11. If you received taxable social security and are claiming a social security exemption, complete Lines 1 through 8 of Part 3 of the MO-A, Section C (social security or social security disability calculation) and enter the amount(s) from Line(s) 6y and 6s here. See instructions if Line 3 of Section C is more than $0	11Y		00	11S		00
12. Subtract Line 11 from Line 10. If Line 11 is greater than Line 10, enter $0	12Y		00	12S		00
13. Add amounts on Lines 12y and 12s	13					00
14. Total Public Pension, subtract Line 5, from Line 13. If Line 5 is greater than Line 13, enter $0	14					00

PRIVATE PENSION CALCULATION — Private pensions are annuities, pensions, 401(K) plans, deferred compensation plans, self-employed retirement plans, and IRA's funded by a private source.

SECTION B

1. Enter your Missouri Adjusted Gross Income from Form MO-1040P, Line 4	1					00
2. Enter your **taxable** social security benefits from federal Form 1040A, Line 14b or federal Form 1040, Line 20b	2					00
3. Subtract Line 2 from Line 1	3					00
4. Select the appropriate filing status and enter the amount on Line 4: Married filing combined: $32,000; Single, Head of Household and Qualifying Widower: $25,000; Married Filing Separate: $16,000	4					00
5. Subtract Line 4 from Line 3. If Line 4 is greater than Line 3, enter $0	5					00
	Y - YOURSELF			**S - SPOUSE**		
6. Enter **taxable** pension for each spouse from **private sources** from federal Form 1040A, Lines 11b and 12b, or federal Form 1040, Lines 15b and 16b.	6Y		00	6S		00
7. Enter the amounts from Line 6Y and 6S or $6,000, whichever is less	7Y		00	7S		00
8. Add Lines 7Y and 7S	8					00
9. **Total private pension**, subtract Line 5 from Line 8. If Line 5 is greater than Line 8, enter $0	9					00

SOCIAL SECURITY OR SOCIAL SECURITY DISABILITY CALCULATION — To be eligible for social security deduction you must be 62 years of age by December 31 and have marked the 62 and older box on page 1 of Form MO-1040P. Age limit does not apply to social security disability deduction.

SECTION C

1. Enter your Missouri Adjusted Gross Income from Form MO-1040P, Line 4	1					00
2. Select the appropriate filing status and enter the amount on Line 2. Married filing combined - $100,000 Single, Head of Household, Married Filing Separate, and Qualifying Widower - $85,000	2					00
3. Subtract Line 2 from Line 1 and enter on Line 3. If Line 2 is greater than Line 1, enter $0	3					00
	Y - YOURSELF			**S - SPOUSE**		
4. Enter **taxable** social security benefits for each spouse from federal Form 1040A, Line 14b or federal Form 1040, Line 20b	4Y		00	4S		00
5. Enter **taxable** social security **disability** benefits for each spouse from federal Form 1040A, Line 14b or federal Form 1040, Line 20b.	5Y		00	5S		00
6. Multiply Line 4 or Line 5 by 50%.	6Y		00	6S		00
7. Add Lines 6Y and 6S.	7					00
8. **Total social security/social security disability**, subtract Line 3 from Line 7. If Line 3 is greater than Line 7, enter $0.	8					00

TOTAL PENSION AND SOCIAL SECURITY / SOCIAL SECURITY DISABILITY EXEMPTION

Total Pension Exemption and Social Security / Social Security Disability Exemption. Add Line 14 (Section A), Line 9 (Section B), and Line 8 (Section C) and enter here and on Form MO-1040P, Line 10	**TOTAL EXEMPTION**		00

MISSOURI ITEMIZED DEDUCTIONS

- **Complete this section only if you itemized deductions on your federal return. (See information on page 6.)**
- **Attach a copy of your Federal Form 1040 (pages 1 and 2) and Federal Schedule A.**

1.	Total federal itemized deductions from Federal Form 1040, Line 40a			1	00
2.	2009 (FICA) — yourself — Social security $ _____ + Medicare $ _____			2	00
3.	2009 (FICA) — spouse — Social security $ _____ + Medicare $ _____			3	00
4.	2009 Railroad retirement tax — yourself (Tier I and Tier II) $ _____ + Medicare $ _____			4	00
5.	2009 Railroad retirement tax — spouse (Tier I and Tier II) $ _____ + Medicare $ _____			5	00
6.	2009 Self-employment tax — Amount from Federal Form 1040, Line 27			6	00
7.	TOTAL — Add Lines 1 through 6.			7	00
8.	State and local income taxes — See instructions.	8	00		
9.	Earnings taxes included in Line 8 — See instructions.	9	00		
10.	Net state income taxes — Subtract Line 9 from Line 8.			10	00
11.	MISSOURI ITEMIZED DEDUCTIONS — Subtract Line 10 from Line 7. Enter here and on Form MO-1040P, Line 8.			11	00

NOTE: IF LINE 11 IS LESS THAN YOUR FEDERAL STANDARD DEDUCTION, SEE INFORMATION ON PAGE 6.

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.

1.	Enter the standard deduction for your filing status: • Single or Married Filing Separately - **$5,700** • Married Filing Combined or Qualifying Widow(er) - **$11,400** • Head of Household - **$8,350** • Claimed as a dependent - enter amount from Line 4 of federal Schedule L.	1	00
2.	If you are over 65 or blind, enter the amount reported on Line 5 of federal Schedule L..	2	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
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
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
6.	Add the amounts shown on Lines 1 through 5 and report the total here and on Form MO-1040P Line 8.	6	00

2009 TAX TABLE

If Line 15 is At least	But less than	Your tax is	If Line 15 is At least	But less than	Your tax is	If Line 15 is At least	But less than	Your tax is	If Line 15 is At least	But less than	Your tax is	If Line 15 is At least	But less than	Your tax is	If Line 15 is At least	But less than	Your tax is
0	100	$ 0	1,500	1,600	$ 26	3,000	3,100	$ 62	4,500	4,600	$109	6,000	6,100	$167	7,500	7,600	$238
100	200	2	1,600	1,700	28	3,100	3,200	65	4,600	4,700	113	6,100	6,200	172	7,600	7,700	243
200	300	4	1,700	1,800	30	3,200	3,300	68	4,700	4,800	116	6,200	6,300	176	7,700	7,800	248
300	400	5	1,800	1,900	32	3,300	3,400	71	4,800	4,900	120	6,300	6,400	181	7,800	7,900	253
400	500	7	1,900	2,000	34	3,400	3,500	74	4,900	5,000	123	6,400	6,500	185	7,900	8,000	258
500	600	8	2,000	2,100	36	3,500	3,600	77	5,000	5,100	127	6,500	6,600	190	8,000	8,100	263
600	700	10	2,100	2,200	39	3,600	3,700	80	5,100	5,200	131	6,600	6,700	194	8,100	8,200	268
700	800	11	2,200	2,300	41	3,700	3,800	83	5,200	5,300	135	6,700	6,800	199	8,200	8,300	274
800	900	13	2,300	2,400	44	3,800	3,900	86	5,300	5,400	139	6,800	6,900	203	8,300	8,400	279
900	1,000	14	2,400	2,500	46	3,900	4,000	89	5,400	5,500	143	6,900	7,000	208	8,400	8,500	285
1,000	1,100	16	2,500	2,600	49	4,000	4,100	92	5,500	5,600	147	7,000	7,100	213	8,500	8,600	290
1,100	1,200	18	2,600	2,700	51	4,100	4,200	95	5,600	5,700	151	7,100	7,200	218	8,600	8,700	296
1,200	1,300	20	2,700	2,800	54	4,200	4,300	99	5,700	5,800	155	7,200	7,300	223	8,700	8,800	301
1,300	1,400	22	2,800	2,900	56	4,300	4,400	102	5,800	5,900	159	7,300	7,400	228	8,800	8,900	307
1,400	1,500	24	2,900	3,000	59	4,400	4,500	106	5,900	6,000	163	7,400	7,500	233	8,900	9,000	312
															9,000		315

PLUS 6% of excess over $9,000

For assistance calculating your tax, go to www.dor.mo.gov/tax and select the Tax Calculator.

Tax on the first $9,000 of taxable income is $315. Tax on the income over $9,000 is calculated at 6%. Example: If Line 15 of the Missouri return is $12,000, then the Missouri tax is $315 + $180 (6% of $3,000) = $495.
NOTE: Make sure **$315** is included in your calculation of tax on taxable income over $9,000.

MISSOURI DEPARTMENT OF REVENUE

PROPERTY TAX CREDIT

2009 FORM MO-PTS

Attachment Sequence No. 1040-07 and 1040P-01

THIS FORM MUST BE ATTACHED TO FORM MO-1040 OR FORM MO-1040P.

NAME

LAST NAME	FIRST NAME	INITIAL	BIRTHDATE	SOCIAL SECURITY NO.
			__ / __ / __ __ __ __	
SPOUSE'S LAST NAME	FIRST NAME	INITIAL	BIRTHDATE	SPOUSE'S SOCIAL SECURITY NO.
			__ / __ / __ __ __ __	

QUALIFICATIONS

You must check a qualification to be eligible for a credit. Check only one. Copies of letters, forms, etc., must be included with claim.

☐ A. 65 years of age or older **(Attach a copy of Form SSA-1099.)**

☐ B. 100% Disabled Veteran as a result of military service **(Attach a copy of the letter from Department of Veterans Affairs.)**

☐ C. 100% Disabled **(Attach a copy of the letter from Social Security Administration or Form SSA-1099.)**

☐ D. 60 years of age or older and received surviving spouse benefits **(Attach a copy of Form SSA-1099.)**

FILING STATUS ☐ Single ☐ Married — Filing Combined ☐ Married — **Living Separate for Entire Year**

If married filing combined, you must report both incomes.

Failure to provide the attachments listed below (rent receipt(s), tax receipt(s), 1099(s), W-2(s), etc.) will result in denial or delay of your claim.

1. Enter the amount of income from Form MO-1040, Line 6, OR Form MO-1040P, Line 4.	1		00
2. Enter the amount of nontaxable social security benefits received by you and/or your minor children before any deductions and/or the amount of social security equivalent railroad retirement benefits. **Attach a copy of Form SSA-1099 and/or RRB-1099.**	2		00
3. Enter the total amount of pensions, annuities, dividends, rental income, or interest income not included in Line 1. Include tax exempt interest from Form MO-A, Part 1, Line 7 (if filing Form MO-1040). **Attach Forms W-2(s), 1099(s), 1099-R(s), 1099-DIV, 1099-INT, 1099-MISC, 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). If filing Form MO-1040, refer to Form MO-A, Part 1, Line 9.**	4		00
5. Enter the amount of veteran's payments or benefits before any deductions. **Attach letter from Veterans Affairs.**	5		00
6. Enter the total amount received by you and/or your **minor children** from: public assistance, SSI, child support, or Temporary Assistance payments (TA and/or TANF). **Attach a copy of Form SSA-1099(s), a letter from the Social Security Administration and/or Social Services that includes the total amount of assistance received and Employment Security 1099, if applicable.**	6		00
7. Enter the amount of nonbusiness loss(es). You must include nonbusiness losses in your household income (as a positive amount) here. **(Include capital loss from Federal Form 1040, Line 13.)**	7		00
8. **TOTAL** household income — Add Lines 1 through 7. Enter total here.	8		00
9. Mark the box that applies and enter the appropriate amount. ☐ a. Enter $0 if filing status is Single or Married Living Separate; **If married and filing combined;** ☐ b. Enter $2,000 if you rented or did not own your home for the entire year; ☐ c. Enter $4,000 if you owned and occupied your home for the entire year;	9	-	00
10. Net household income — Subtract Line 9 from Line 8 and enter the amount; mark the box that applies. ☐ a. **If you rented or did not own and occupy your home for the entire year**, Line 10 cannot exceed $27,500. If the total is greater than $27,500, **STOP - no credit is allowed. Do not file this claim.** ☐ b. **If you owned and occupied your home for the entire year**, Line 10 cannot exceed $30,000. If the total is greater than $30,000, **STOP - no credit is allowed. Do not file this claim.**	10		00
11. If you owned your home, enter the total amount of property tax paid for your home less special assessments. **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 Form 948, Assessor's Certification.**	11		00
12. If you rented your home, enter the amount from Form MO-CRP(s), Line 9. **Attach rent receipt(s) for each rent payment or a summary for the entire year; a statement from your landlord, or copies of cancelled checks (front and back) along with Form MO-CRP. NOTE: If you rent from a facility that does not pay property taxes, you are not eligible for a Property Tax Credit.**	12		00
13. Add Lines 11 and 12. If you rented your home, enter the total or $750, whichever is less. If you owned your home, enter the total or $1,100, whichever is less.	13		00
14. Apply Lines 10 and 13 to the chart in the instructions for MO-1040, pages 39-41 or MO-1040P, pages 27-29 to figure your Property Tax Credit. You **must use the chart** to see how much credit you are allowed. Note: Renters - maximum allowed is $750. Owners - maximum allowed is $1,100. Enter this amount on Form MO-1040, Line 38 OR Form MO-1040P, Line 20.	14		00

THIS FORM MUST BE ATTACHED TO FORM MO-1040 OR FORM MO-1040P.

For Privacy Notice, see the instructions.

MISSOURI DEPARTMENT OF REVENUE

CERTIFICATION OF RENT PAID FOR 2009

2009 FORM MO-CRP

Failure to provide landlord information will result in denial or delay of your claim.

1. SOCIAL SECURITY NUMBER	SPOUSE'S SOCIAL SECURITY NUMBER	ARE YOU RELATED TO YOUR LANDLORD? ☐ YES ☐ NO IF YES, EXPLAIN.
2. NAME	3. **LANDLORD'S** NAME, LAST 4 DIGITS OF SSN, OR FEIN **(MUST BE COMPLETED)**	
PHYSICAL ADDRESS OF RENTAL UNIT **(P.O. BOX NOT ALLOWED)** / APT. NUMBER	**LANDLORD'S** ADDRESS, CITY, STATE, AND ZIP CODE **(MUST BE COMPLETED)** / APT. NUMBER	
CITY, STATE, AND ZIP CODE	4. **LANDLORD'S** PHONE NUMBER **(MUST BE COMPLETED)** (___ ___ ___) ___ ___ ___ - ___ ___ ___ ___	

5. RENTAL PERIOD DURING YEAR — FROM: MONTH ___ DAY ___ YEAR **2009** — TO: MONTH ___ DAY ___ YEAR **2009**

6. Enter your gross rent paid. **Attach rent receipt(s) for each rent payment for the entire year, a statement from your landlord, or copies of cancelled checks (front and back). If receiving housing assistance, enter the amount of rent YOU paid.** . . . 6 ____ 00

NOTE: If you rent from a facility that does not pay property taxes, you are not eligible for a Property Tax Credit.

7. Check the appropriate box and enter the corresponding percentage on Line 7.
   - ☐ A. APARTMENT, HOUSE, MOBILE HOME, OR DUPLEX — **100%**
   - ☐ B. MOBILE HOME LOT — **100%**
   - ☐ C. BOARDING HOME / RESIDENTIAL CARE — **50%**
   - ☐ D. SKILLED OR INTERMEDIATE CARE NURSING HOME — **45%**
   - ☐ E. HOTEL If meals are included, enter — **50%;** Otherwise, enter — **100%**
   - ☐ F. LOW INCOME HOUSING — **100%** **(Rent cannot exceed 40% of total household income.)**
   - ☐ G. SHARED RESIDENCE — If you shared your rent with relatives and/or friends **(other than your spouse or children under 18)**, check the appropriate box and enter percentage.

     Additional **persons sharing rent/percentage to be entered:** ☐ 1 (50%) ☐ 2 (33%) ☐ 3 (25%) . . . . . 7 ____ %

8. Net rent paid — Multiply Line 6 by the percentage on Line 7. . . . . 8 ____ 00

9. Multiply Line 8 by 20%. Enter amount here and on Line 10 of Form MO-PTC or Line 12 of Form MO-PTS. . . . . 9 ____ 00

MO 860-1089 (02-2010)

For Privacy Notice, see the instructions.

MISSOURI DEPARTMENT OF REVENUE

CERTIFICATION OF RENT PAID FOR 2009

2009 FORM MO-CRP

Failure to provide landlord information will result in denial or delay of your claim.

1. SOCIAL SECURITY NUMBER	SPOUSE'S SOCIAL SECURITY NUMBER	ARE YOU RELATED TO YOUR LANDLORD? ☐ YES ☐ NO IF YES, EXPLAIN.
2. NAME	3. LANDLORD'S NAME, LAST 4 DIGITS OF SSN, OR FEIN (MUST BE COMPLETED)	
PHYSICAL ADDRESS OF RENTAL UNIT (P.O. BOX NOT ALLOWED) / APT. NUMBER	LANDLORD'S ADDRESS, CITY, STATE, AND ZIP CODE (MUST BE COMPLETED) / APT. NUMBER	
CITY, STATE, AND ZIP CODE	4. LANDLORD'S PHONE NUMBER (MUST BE COMPLETED) (___ ___ ___) ___ ___ ___ - ___ ___ ___ ___	

5. RENTAL PERIOD DURING YEAR — FROM: MONTH ___ DAY ___ YEAR 2009 — TO: MONTH ___ DAY ___ YEAR 2009

6. Enter your gross rent paid. Attach rent receipt(s) for each rent payment for the entire year, a statement from your landlord, or copies of cancelled checks (front and back). If receiving housing assistance, enter the amount of rent YOU paid. . . . 6 ____ 00

NOTE: If you rent from a facility that does not pay property taxes, you are not eligible for a Property Tax Credit.

7. Check the appropriate box and enter the corresponding percentage on Line 7.
   - ☐ A. APARTMENT, HOUSE, MOBILE HOME, OR DUPLEX — 100%
   - ☐ B. MOBILE HOME LOT — 100%
   - ☐ C. BOARDING HOME / RESIDENTIAL CARE — 50%
   - ☐ D. SKILLED OR INTERMEDIATE CARE NURSING HOME — 45%
   - ☐ E. HOTEL If meals are included, enter — 50%; Otherwise, enter — 100%
   - ☐ F. LOW INCOME HOUSING — 100% (Rent cannot exceed 40% of total household income.)
   - ☐ G. SHARED RESIDENCE — If you shared your rent with relatives and/or friends (other than your spouse or children under 18), check the appropriate box and enter percentage.

     Additional persons sharing rent/percentage to be entered: ☐ 1 (50%) ☐ 2 (33%) ☐ 3 (25%) . . . . . 7 ____ %

8. Net rent paid — Multiply Line 6 by the percentage on Line 7. . . . . 8 ____ 00

9. Multiply Line 8 by 20%. Enter amount here and on Line 10 of Form MO-PTC or Line 12 of Form MO-PTS. . . . . 9 ____ 00

MO 860-1089 (02-2010)

For Privacy Notice, see the instructions.

MISSOURI DEPARTMENT OF REVENUE

PROPERTY TAX CREDIT

2009 FORM MO-PTS

Attachment Sequence No. 1040-07 and 1040P-01

THIS FORM MUST BE ATTACHED TO FORM MO-1040 OR FORM MO-1040P.

NAME

LAST NAME	FIRST NAME	INITIAL	BIRTHDATE	SOCIAL SECURITY NO.
			__ / __ / __ __ __ __	
SPOUSE'S LAST NAME	FIRST NAME	INITIAL	BIRTHDATE	SPOUSE'S SOCIAL SECURITY NO.
			__ / __ / __ __ __ __	

QUALIFICATIONS

You must check a qualification to be eligible for a credit. Check only one. Copies of letters, forms, etc., must be included with claim.

☐ A. 65 years of age or older **(Attach a copy of Form SSA-1099.)**

☐ B. 100% Disabled Veteran as a result of military service **(Attach a copy of the letter from Department of Veterans Affairs.)**

☐ C. 100% Disabled **(Attach a copy of the letter from Social Security Administration or Form SSA-1099.)**

☐ D. 60 years of age or older and received surviving spouse benefits **(Attach a copy of Form SSA-1099.)**

FILING STATUS ☐ Single ☐ Married — Filing Combined ☐ Married — **Living Separate for Entire Year**

If married filing combined, you must report both incomes.

Failure to provide the attachments listed below (rent receipt(s), tax receipt(s), 1099(s), W-2(s), etc.) will result in denial or delay of your claim.

1. Enter the amount of income from Form MO-1040, Line 6, OR Form MO-1040P, Line 4.	1		00
2. Enter the amount of nontaxable social security benefits received by you and/or your minor children before any deductions and/or the amount of social security equivalent railroad retirement benefits. **Attach a copy of Form SSA-1099 and/or RRB-1099.**	2		00
3. Enter the total amount of pensions, annuities, dividends, rental income, or interest income not included in Line 1. Include tax exempt interest from Form MO-A, Part 1, Line 7 (if filing Form MO-1040). **Attach Forms W-2(s), 1099(s), 1099-R(s), 1099-DIV, 1099-INT, 1099-MISC, 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). If filing Form MO-1040, refer to Form MO-A, Part 1, Line 9.**	4		00
5. Enter the amount of veteran's payments or benefits before any deductions. **Attach letter from Veterans Affairs.**	5		00
6. Enter the total amount received by you and/or your **minor children** from: public assistance, SSI, child support, or Temporary Assistance payments (TA and/or TANF). **Attach a copy of Form SSA-1099(s), a letter from the Social Security Administration and/or Social Services that includes the total amount of assistance received and Employment Security 1099, if applicable.**	6		00
7. Enter the amount of nonbusiness loss(es). You must include nonbusiness losses in your household income (as a positive amount) here. **(Include capital loss from Federal Form 1040, Line 13.)**	7		00
8. **TOTAL** household income — Add Lines 1 through 7. Enter total here.	8		00
9. Mark the box that applies and enter the appropriate amount. ☐ a. Enter $0 if filing status is Single or Married Living Separate; **If married and filing combined;** ☐ b. Enter $2,000 if you rented or did not own your home for the entire year; ☐ c. Enter $4,000 if you owned and occupied your home for the entire year;	9	-	00
10. Net household income — Subtract Line 9 from Line 8 and enter the amount; mark the box that applies. ☐ a. **If you rented or did not own and occupy your home for the entire year**, Line 10 cannot exceed $27,500. If the total is greater than $27,500, **STOP - no credit is allowed. Do not file this claim.** ☐ b. **If you owned and occupied your home for the entire year**, Line 10 cannot exceed $30,000. If the total is greater than $30,000, **STOP - no credit is allowed. Do not file this claim.**	10		00
11. If you owned your home, enter the total amount of property tax paid for your home less special assessments. **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 Form 948, Assessor's Certification.**	11		00
12. If you rented your home, enter the amount from Form MO-CRP(s), Line 9. **Attach rent receipt(s) for each rent payment or a summary for the entire year; a statement from your landlord, or copies of cancelled checks (front and back) along with Form MO-CRP. NOTE: If you rent from a facility that does not pay property taxes, you are not eligible for a Property Tax Credit.**	12		00
13. Add Lines 11 and 12. If you rented your home, enter the total or $750, whichever is less. If you owned your home, enter the total or $1,100, whichever is less.	13		00
14. Apply Lines 10 and 13 to the chart in the instructions for MO-1040, pages 39-41 or MO-1040P, pages 27-29 to figure your Property Tax Credit. You **must use the chart** to see how much credit you are allowed. Note: Renters - maximum allowed is $750. Owners - maximum allowed is $1,100. Enter this amount on Form MO-1040, Line 38 OR Form MO-1040P, Line 20.	14		00

THIS FORM MUST BE ATTACHED TO FORM MO-1040 OR FORM MO-1040P.

For Privacy Notice, see the instructions.

MISSOURI DEPARTMENT OF REVENUE

CERTIFICATION OF RENT PAID FOR 2009

2009 FORM MO-CRP

Failure to provide landlord information will result in denial or delay of your claim.

1. SOCIAL SECURITY NUMBER	SPOUSE'S SOCIAL SECURITY NUMBER	ARE YOU RELATED TO YOUR LANDLORD? ☐ YES ☐ NO IF YES, EXPLAIN.
2. NAME	3. **LANDLORD'S** NAME, LAST 4 DIGITS OF SSN, OR FEIN **(MUST BE COMPLETED)**	
PHYSICAL ADDRESS OF RENTAL UNIT **(P.O. BOX NOT ALLOWED)** / APT. NUMBER	**LANDLORD'S** ADDRESS, CITY, STATE, AND ZIP CODE **(MUST BE COMPLETED)** / APT. NUMBER	
CITY, STATE, AND ZIP CODE	4. **LANDLORD'S** PHONE NUMBER **(MUST BE COMPLETED)** (___ ___ ___) ___ ___ ___ - ___ ___ ___ ___	

5. RENTAL PERIOD DURING YEAR — FROM: MONTH ___ DAY ___ YEAR **2009** — TO: MONTH ___ DAY ___ YEAR **2009**

6. Enter your gross rent paid. **Attach rent receipt(s) for each rent payment for the entire year, a statement from your landlord, or copies of cancelled checks (front and back). If receiving housing assistance, enter the amount of rent YOU paid.** . . . 6 ____ 00

NOTE: If you rent from a facility that does not pay property taxes, you are not eligible for a Property Tax Credit.

7. Check the appropriate box and enter the corresponding percentage on Line 7.
   - ☐ A. APARTMENT, HOUSE, MOBILE HOME, OR DUPLEX — **100%**
   - ☐ B. MOBILE HOME LOT — **100%**
   - ☐ C. BOARDING HOME / RESIDENTIAL CARE — **50%**
   - ☐ D. SKILLED OR INTERMEDIATE CARE NURSING HOME — **45%**
   - ☐ E. HOTEL If meals are included, enter — **50%;** Otherwise, enter — **100%**
   - ☐ F. LOW INCOME HOUSING — **100%** **(Rent cannot exceed 40% of total household income.)**
   - ☐ G. SHARED RESIDENCE — If you shared your rent with relatives and/or friends **(other than your spouse or children under 18)**, check the appropriate box and enter percentage.

     Additional **persons sharing rent/percentage to be entered:** ☐ 1 (50%) ☐ 2 (33%) ☐ 3 (25%) . . . . . 7 ____ %

8. Net rent paid — Multiply Line 6 by the percentage on Line 7. . . . . 8 ____ 00

9. Multiply Line 8 by 20%. Enter amount here and on Line 10 of Form MO-PTC or Line 12 of Form MO-PTS. . . . . 9 ____ 00

MO 860-1089 (02-2010)

For Privacy Notice, see the instructions.

MISSOURI DEPARTMENT OF REVENUE

CERTIFICATION OF RENT PAID FOR 2009

2009 FORM MO-CRP

Failure to provide landlord information will result in denial or delay of your claim.

1. SOCIAL SECURITY NUMBER	SPOUSE'S SOCIAL SECURITY NUMBER	ARE YOU RELATED TO YOUR LANDLORD? ☐ YES ☐ NO IF YES, EXPLAIN.
2. NAME	3. LANDLORD'S NAME, LAST 4 DIGITS OF SSN, OR FEIN (MUST BE COMPLETED)	
PHYSICAL ADDRESS OF RENTAL UNIT (P.O. BOX NOT ALLOWED) / APT. NUMBER	LANDLORD'S ADDRESS, CITY, STATE, AND ZIP CODE (MUST BE COMPLETED) / APT. NUMBER	
CITY, STATE, AND ZIP CODE	4. LANDLORD'S PHONE NUMBER (MUST BE COMPLETED) (___ ___ ___) ___ ___ ___ - ___ ___ ___ ___	

5. RENTAL PERIOD DURING YEAR — FROM: MONTH ___ DAY ___ YEAR 2009 — TO: MONTH ___ DAY ___ YEAR 2009

6. Enter your gross rent paid. Attach rent receipt(s) for each rent payment for the entire year, a statement from your landlord, or copies of cancelled checks (front and back). If receiving housing assistance, enter the amount of rent YOU paid. . . . 6 ____ 00

NOTE: If you rent from a facility that does not pay property taxes, you are not eligible for a Property Tax Credit.

7. Check the appropriate box and enter the corresponding percentage on Line 7.
   - ☐ A. APARTMENT, HOUSE, MOBILE HOME, OR DUPLEX — 100%
   - ☐ B. MOBILE HOME LOT — 100%
   - ☐ C. BOARDING HOME / RESIDENTIAL CARE — 50%
   - ☐ D. SKILLED OR INTERMEDIATE CARE NURSING HOME — 45%
   - ☐ E. HOTEL If meals are included, enter — 50%; Otherwise, enter — 100%
   - ☐ F. LOW INCOME HOUSING — 100% (Rent cannot exceed 40% of total household income.)
   - ☐ G. SHARED RESIDENCE — If you shared your rent with relatives and/or friends (other than your spouse or children under 18), check the appropriate box and enter percentage.

     Additional persons sharing rent/percentage to be entered: ☐ 1 (50%) ☐ 2 (33%) ☐ 3 (25%) . . . . . 7 ____ %

8. Net rent paid — Multiply Line 6 by the percentage on Line 7. . . . . 8 ____ 00

9. Multiply Line 8 by 20%. Enter amount here and on Line 10 of Form MO-PTC or Line 12 of Form MO-PTS. . . . . 9 ____ 00

MO 860-1089 (02-2010)

For Privacy Notice, see the instructions.

MISSOURI DEPARTMENT OF REVENUE

2009 INDIVIDUAL CONSUMER'S USE TAX RETURN

FORM	TAX PERIOD	DUE DATE
4340 REV. 09-2009	Jan. – Dec. 09 (200912)	04/15/2010

LAST NAME	FIRST NAME	INITIAL	SOCIAL SECURITY NO.
SPOUSE'S LAST NAME	FIRST NAME	INITIAL	SPOUSE'S SOCIAL SECURITY NO.

ADDRESS

CITY | STATE | ZIP CODE ___ ___ ___ ___ ___

I have direct control, supervision, or responsibility for filing this return and payment of the tax due. Under penalties of perjury, I declare that this is a true, accurate, and complete return.

SIGNATURE(S) | DATE __ __ / __ __ / __ __ __ __ | DAYTIME TELEPHONE (___ ___ ___) ___ ___ ___ - ___ ___ ___ ___ | DOR ONLY

TAXABLE PURCHASES	TAX RATE	CONSUMER'S USE TAX
A.		1.
B.	4.225%	2.
Total Individual Consumer's Use Tax Due (U.S. funds only)		3.

MAKE CHECK PAYABLE TO: MISSOURI DIRECTOR OF REVENUE. MAIL TO MISSOURI DEPARTMENT OF REVENUE, PO BOX 840, JEFFERSON CITY, MO 65105-0840. **DO NOT SEND WITH INDIVIDUAL INCOME TAX RETURN.** 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.

What is Consumer's Use Tax? Use tax is imposed on the storage, use, or consumption of tangible personal property in this state. You must pay consumer's use tax on tangible personal property stored, used, or consumed in Missouri unless you paid tax to the seller or the property is exempt from tax.

What is Taxable? If an out-of-state seller does not collect use tax from the purchaser, the purchaser is responsible for remitting the use tax to Missouri(unless the property is purchased for resale or otherwise exempt by statute). Also, a seller not engaged in business is not required to collect Missouri tax but the purchaser in these instances is responsible for remitting use tax to Missouri. A purchaser is required to file a use tax return if the cumulative purchases subject to use tax exceed $2,000 in a calendar year. Use tax is computed on the purchase price of the goods.

Purchases which may be subject to use tax include:

- Catalog purchases
- Cross-border purchases of goods
- Computer software and hardware
- Magazine subscriptions
- TV marketing purchases
- Mail-order supply purchases
- Furniture and equipment purchases from out-of-state sellers
- Purchases of goods bought over the Internet
- Purchases of goods bought over the telephone

Why am I required to file? When you make purchases on which the seller is not required to collect the tax you must pay the tax directly to the state of Missouri.

HOW TO FILE

Compile a list of purchases made during 2009 for which you have not previously paid Missouri sales or use tax. This information is available from invoices, bills, credit card statements, cancelled checks, etc. The total of all purchases during the year that were not previously taxed must be used in computing the amount of use tax due on the above 2009 Individual Consumer's Use Tax Return. The due date for filing the return is April 15, 2010.

TAXABLE PURCHASES/TAX RATE

The tax rate you must use to figure your consumer's use tax due is determined by the use tax rate in effect where you reside. The use tax rate for Missouri is 4.225% unless the city and/or county for your residential location has enacted a local option use tax, which will increase the tax rate. The correct use tax rate can be found at: http://dor.mo.gov/tax/business/sales/rates/2009/. Use the "USE RATE" column.

If the use tax rate is **greater than** 4.225%, enter your taxable purchases on Line A and the applicable tax rate.

If the use tax rate is 4.225%, enter your taxable purchases on Line B and compute the amount due at the state use tax rate of 4.225%. You may be required to use both Lines A and B if you resided in different locations during 2009.

CONSUMER'S USE TAX

Multiply taxable purchases (Line(s) A and/or B) by the appropriate tax rate and enter the amount on Line(s) 1 and/or 2.

TOTAL INDIVIDUAL CONSUMER'S USE TAX DUE

Add Lines 1 and 2 and enter the amount on Line 3.

For questions regarding the Missouri consumer's use tax, please e-mail salesuse@dor.mo.gov or call (573) 751-2836. Speech and hearing impaired may use TDD (800) 735-2966 or fax (573) 526-1881.

The use tax rates may be found on the internet at http://dor.mo.gov/tax/business/sales/rates/2009/. Use the "USE RATE" column to ensure correct rates.

MISSOURI DEPARTMENT OF REVENUE

INDIVIDUAL INCOME TAX PAYMENT VOUCHER

2009 FORM MO-1040V

PLEASE PRINT. MAKE CHECK PAYABLE TO MISSOURI DEPARTMENT OF REVENUE. MAIL FORM MO-1040V AND PAYMENT TO THE MISSOURI DEPARTMENT OF REVENUE, P.O. BOX 371, JEFFERSON CITY, MO 65105-0371.

NAME

SPOUSE'S NAME

STREET ADDRESS

CITY | STATE | ZIP CODE

FULL PAYMENT OF TAXES MUST BE SUBMITTED BY APRIL 15, 2010 TO AVOID INTEREST AND ADDITIONS TO TAX FOR FAILURE TO PAY. 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.

• PLEASE SEND CHECK OR MONEY ORDER (U.S. FUNDS ONLY)

1. Social security number . . . . . *
2. Name control . . . . . *
3. Spouse's social security number . . . . . *
4. Spouse's name control . . . . . *
5. **Amount of payment** (U.S. funds only) . . . . . $ .00

DOR USE ONLY *

*

Pension Exemption Worksheet

Pension and Social Security/Social Security Disability Exemption

If you are claiming a pension and/or social security/social security disability exemption, you must attach a copy of your federal return (pages 1 and 2), your Form 1099-R(s), and/or SSA-1099(s). Failure to provide this information will result in your exemption being disallowed.

Public Pension Calculation

Public pensions are pensions received from any federal, state, or local government. If you have questions about whether your pension is a public or a private pension, contact your pension administrator.

Line 1—Missouri Adjusted Gross Income

Include your Missouri adjusted gross income from Form MO-1040P, Line 4.

Line 2—Taxable Social Security Benefits

Include the **taxable** 2009 social security benefits for each spouse. This information can be found on:

- Federal Form 1040A—Line 14b
- Federal Form 1040—Line 20b

Line 6—Taxable Public Pension

Include the taxable 2009 public pension for each spouse. This information can be found on:

- Federal Form 1040A— Line 12b
- Federal Form 1040—Line 16b

Do not include any payments from private pensions, social security benefits or railroad retirement payments on this line. (Exception: If you are 100 percent disabled, you may consider railroad retirement as taxable public pension).

Line 11 — Social Security or Social Security Disability Exemption

Include the amount from Lines 6Y and 6S from Page 3 of the MO-1040P, Section C (social security or social security disability calculation), unless you are a single individual with income greater than $85,000 or a married couple with income greater than $100,000. For single individuals with income greater than $85,000 enter the amount from Line 8 of Section C. For married couples with income greater than $100,000 , multiply Line 8 by the percentages on Line 3Y and 3S of the worksheet for Lines 4 and 5 (next column), and enter those amounts here. If you are not eligible for the social security or social security disability exemption, enter a $0 on Line 11.

Private Pension Calculation Line 2 — Taxable Social Security Benefits

Include the taxable 2009 social security benefits. This information can be found on:

- Federal Form 1040A—Line 14b
- Federal Form 1040—Line 20b

Line 6 — Taxable Pension

Include the taxable 2009 pension received from private sources for each spouse. This information can be found on:

- Federal Form 1040A - Lines 11b and 12b
- Federal Form 1040 - Lines 15b and 16b

Do not include any payments from public pensions, social security benefits, or railroad retirement payments on this line.

Social Security or Social Security Disability Calculation Line 4 — Taxable Social Security Benefits

To take the social security exemption, you must be age 62 or older. An individual that receives social security retirement benefits, partial benefits at age 62, full benefits at age 65 or older, or a disabled individual receiving social security disability income (SSDI), who reaches full retirement age during the taxable year and receives retirement benefits should include on Line 4, the amount of federal taxable benefits, which can be found on:

- Federal Form 1040A—Line 14b
- Federal Form 1040—Line 20b

Taxable social security benefits must be allocated by each spouse's share of the benefits received for the year. To determine each spouse's portion of the taxable social security on Line 4, complete worksheet for Lines 4 and 5 (below).

Line 5 — Taxable Social Security Disability Benefits

A disabled individual, receiving social security disability income (SSDI) for the entire taxable year should enter on **Line 5,** the amount of **federal taxable benefits,** which can be found on:

- Federal Form 1040A— Line 14b
- Federal Form 1040—Line 20b

Taxable social security disability benefits must be allocated by each spouse's share of the benefits received for the year. To determine each spouse's portion of the taxable social security disability on Line 5, complete worksheet for Lines 4 and 5 (below).

Note: A taxpayer filing single, head of household, qualifying widower, or married filing separate may **not** enter amounts on both Line 4, Taxable Social Security Benefits, and Line 5, Taxable Social Security Disability Benefits. Report only Social Security Benefits on Line 4 and Social Security Disability Benefits on Line 5. However, if you are married filing a combined return, one spouse may enter an amount on Line 4 and the other spouse may enter an amount on Line 5.

Missouri Itemized Deductions

You cannot itemize your Missouri deductions if you took the standard deduction on your federal return. See Page 6, Line 8.

You must itemize your Missouri deductions if you were required to itemize on your federal return.

Line 1 — Federal Itemized Deductions

Include your total federal itemized deductions from Federal Form 1040, Line 40a, and any **approved** cultural contributions (literary, musical, scholastic, or artistic) to a tax exempt agency or institution that is operated on a not-for-profit basis. **Cash contributions do not qualify.** Contact the Department of Revenue at (573) 526-8942 to determine if your contribution qualifies.

Worksheet for Lines 4 and 5

		Yourself	Spouse
1. Total social security - Enter amount from: • Federal Form 1040A, Line 14a • Federal Form 1040, Line 20a	1 _____		
2. Enter each spouse's portion of the total social security		2Y_____	2S_____
3. Divide Line 2Y and 2S by Line 1		3Y_____%	3S_____%
4. Taxable social security - Enter amount from: • Federal Form 1040A, Line 14b • Federal Form 1040, Line 20b	4 _____		
5. Multiply Line 4 by percentages on 3Y and 3S and enter amounts here and on Lines 4 and/or 5 of Page 3 of MO-1040P, Section C		5Y_____	5S_____

Lines 2 and 3 — Social Security Tax (FICA)

Social security tax is the amount in the social security tax withheld box on Form W-2(s). **The amount cannot exceed $6,621.60.** Your Medicare is the amount in the Medicare tax withheld box on Form W-2(s). Enter the total on Line 2. Repeat for **your spouse** and enter the total on Line 3.

Lines 4 and 5 — Railroad Retirement Tax

Include the amount of railroad retirement tax withheld from your wages, Tier I and Tier II, during 2009. **The amount cannot exceed $9,710.60.** (Tier I maximum of $6,621.60 and Tier II maximum of $2,960.) Enter the total on Line 4. Repeat for **your spouse** and enter the total on Line 5.

If a person has both FICA and railroad retirement tax, the maximum deduction allowed is the amount withheld as shown on the Form W-2(s) less, either the amount entered on Federal Form 1040, Line 69, or, if only one employer, the amount refunded by the employer.

Line 6 — Self-Employment Tax

Include as your self-employment tax the amount from Federal Form 1040, Line 27.

Line 8 — State and Local Income Taxes

Include the amount of **income taxes** from Federal Form 1040, Schedule A, Line 5. Do not include general **sales taxes** on Line 8. The amount you paid in state **income taxes** included in your federal itemized deductions, must be subtracted to determine Missouri itemized deductions.

Line 9 — Earnings Taxes

If you entered an amount on Line 8 and you live or work in the Kansas City or St. Louis area, you may have included earnings taxes. Include on Line 9 the amount of earnings taxes withheld shown on Form W-2(s). See Diagram Page 32, Box 19.

Line 11 — Total Itemized Deductions

If your total Missouri itemized deductions are less than your standard deduction (see Page 6, Line 8) you should take the standard deduction on the front of Form MO-1040P, Line 8, unless you were required to itemize your federal deductions. If you are required to itemize on the federal return, you must use the itemized amount from the itemized worksheet.

Attach a copy of Federal Form 1040 (pages 1 and 2) and Federal Schedule A.

FORM SSA-1099 – SOCIAL SECURITY BENEFIT STATEMENT

2009 • PART OF YOUR SOCIAL SECURITY BENEFITS SHOWN IN BOX 5 MAY BE TAXABLE INCOME.
• SEE THE REVERSE SIDE FOR MORE INFORMATION.

Box 1. Name	Box 2. Beneficiary's Social Security Number
BETTY TAXPAYER	555-66-7777

Box 3. Benefits Paid in 2009	Box 4. Benefits Repaid to SSA in 2009	Box 5. Net Benefits for 2009 *(Box 3 minus Box 4)*
*$8,400.00	NONE	$8,400.00

DESCRIPTION OF AMOUNT IN BOX 3

Paid by check or direct deposit	$7,800.00
Medicare premiums deducted from your benefit	$600.00
Total Additions	$8,400.00
Benefits for 2009	$8,400.00

*Includes: $12.00 Paid in 2009 for 2008

DESCRIPTION OF AMOUNT IN BOX 4

NONE

Box 6. Voluntary Federal Income Tax Withheld

NONE

Box 7. Address

BETTY TAXPAYER
5500 TAXES LANE
TAXTOWN, MO 55555-5555

Box 8. Claim Number *(Use this number if you need to contact SSA.)*

555-66-7777

Form **SSA-1099-SM** (11-2009) **DO NOT RETURN THIS FORM TO SSA OR IRS** 0603554

Additional Standard Deduction

If you increased your federal standard deduction by a net disaster loss, state or local real estate taxes, or new motor vehicle taxes, you must complete Form MO-L. See line by line instructions for Form MO-L on Page 4 of the MO-1040P.

FORM MO-PTS

Information to Complete Property Tax Credit Schedule

If you qualify for the Property Tax Credit you must attach your Form MO-PTS to your Form MO-1040P and mail to: Missouri Department of Revenue, P.O. Box 2800, Jefferson City, MO 65105-2800.

Important: You must complete Form MO-1040P, Line 1 through Line 19, before you complete Form MO-PTS.

Note: If your filing status on Form MO-1040P is married filing combined, but you and your spouse lived at different addresses the entire year, you may file a separate **Form MO-PTC**.

(Example: One spouse lives in a nursing home or residential care facility while the other spouse remains in the home the entire year.) If filing a separate **Form MO-PTC**, you cannot take the $2,000 or $4,000 deduction on Line 7 and you cannot calculate your Property Tax Credit on the Form MO-PTS.

Qualifications

Check the applicable box to indicate under which qualification you are filing the Form MO-PTS. See "Am I Eligible" chart on page 4. You must check a qualification box to be eligible for the credit. Check **only** one box. **Attach the appropriate documentation to verify your qualification.** (The required documentation is listed behind each qualification on Form MO-PTS.)

Helpful Hints

- If you are legally married and living together at any time during the year, you **must** file married filing combined and include all household income.
- Please use the social security number of the person filing the claim.

Line 2 — Social Security Benefits

Enter the amount of nontaxable social security benefits you and/or your minor children received before any deductions and/or amount of social security equivalent railroad retirement benefits. See the following to determine nontaxable benefits:

- Federal Form 1040, Line 20a less Line 20b
- Federal Form 1040A, Line 14a less Line 14b
- Form SSA-1099 and/or RRB-1099, Total Amount Before Deductions (if you did not include an amount on Federal Forms 1040 or 1040A)

Lump sum distributions must be claimed in the year in which they were received.

Helpful Hint

Wait to file your return until you get your Form SSA-1099 received in January, 2010 that states what your benefits were for the entire 2009 year. See the diagram on page 23.

If you are receiving railroad retirement benefits, you should get two Form RRB-1099s. Form RRB-1099-R shows annuities and pensions and the Form RRB-1099 is your social security equivalent railroad retirement benefits. Include the amount from Form RRB-1099 that states social security equivalent (usually Tier 1 benefits) on Line 2.

Line 3 — Exempt Interest and Pension Income

Enter the amount of pensions, annuities, dividends, rental income, or exempt interest income **not** included on Form MO-PTS, Line 1. See the following to determine the amount of your nontaxable pension or exempt interest:

- Forms 1099-R(s) or W-2P(s) — Total amount before deductions not included on Form MO-1040P, Line 4 (Missouri adjusted gross income).
- Form 1099-INT(s) — Total amount not included on Form MO-1040P, Line 4 (Missouri adjusted gross income).

If grants or long-term care benefits are made payable to the nursing facility, do not include as income or rent.

Line 4 — Railroad Retirement Benefits

Form MO-1040P does not have provisions for subtracting railroad retirement benefits from federal adjusted gross income. If you have railroad retirement benefits, you must file Form MO-1040. See page 3 for information on how to obtain forms.

Line 5 — Veteran Benefits

Include your veteran payments and benefits. Veteran payments and benefits include education or training allowances, disability compensation, grants, and insurance proceeds.

Exceptions: If you are 100 percent disabled as a result of military service, you are not required to include your veteran payments and benefits. You must attach a letter from the Veterans Administration that states that you are 100 percent disabled as a result of military service. To request a copy of the letter call the Veterans Administration at (800) 827-1000.

If you are a surviving spouse and your spouse was 100 percent disabled as a result of military service, all the veteran payments and benefits must be included.

Line 6 — Public Assistance

Include the amount of public assistance, supplemental security income (SSI), child support, unemployment compensation, and Temporary Assistance payments received by you and/ or your minor children. Temporary Assistance payments include Temporary Assistance for Needy Families (TANF) payments. In Missouri, the program is referred to as Temporary Assistance (TA). This includes any governmental cash received. Do not include the value of commodity foods, food stamps, or heating and cooling assistance. **Attach a copy of Form SSA-1099(s), a letter from Social Security Administration and/or Social Services that includes the total amount of assistance received and Employment Security 1099, if applicable.**

Helpful Hints

- Supplemental security income (SSI) is paid by the Social Security Administration. You have to request an SSI form indicating total benefits received from your local social security office. The form should be stamped or signed by the Social Security Administration. If you have minor children who receive SSI benefits, the children do not qualify for a credit. However, if you qualify for a credit, you must include the children's SSI benefits on Line 6.
- If you receive temporary assistance from the Children's Division (CD) or the Family Support Division (FSD), you must include **all** cash benefits received for your **entire** household. The Department of Revenue verifies this information and failure to include total benefits may delay your refund.

Line 7 — Nonbusiness Loss(es)

Complete Line 7 only if nonbusiness losses reduced the amount reported on Form MO-PTS, Line 1. If Line 1 was reduced by nonbusiness losses, add back the amount of the loss on Line 7 (as a positive amount).

A nonbusiness loss is a loss of income that did not result from a trade or business. (Losses from Federal Form 1040, Schedule F and Schedule C, are considered business losses and should not be included here.)

Line 9 — Filing Status Deduction

Use your filing status to determine the deduction amount that will be entered on Line 9. If your filing status is **Single or Married Living Separate**, you will enter $0 on Line 9.

If your filing status is **Married and Filing Combined**, see below to determine the amount you will enter on Line 9.

- If you OWNED and OCCUPIED your home for the **ENTIRE YEAR**, enter $4,000 on Line 9.
- If you RENTED or **did not** own your home for the **ENTIRE YEAR**, enter $2,000 on Line 9.

Line 10 — Net Household Income

Subtract Line 9 from Line 8 and enter amount on Line 10. If you RENTED or did not own and occupy your home for the **ENTIRE YEAR**, the amount you enter on Line 10 cannot exceed $27,500. If the amount of your net household income on Line 10 is above $27,500, and you are not eligible for the credit, there is no need in completing and submitting the form.

If you OWNED AND OCCUPIED your home for the **ENTIRE YEAR**, the amount you enter on Line 10 cannot exceed $30,000. If the amount of your net household income on Line 10 is above $30,000, you are not eligible for the credit. There is no need in completing and submitting Form MO-PTS.

Note: Your home or dwelling is the place in which you reside in Missouri, whether owned or rented, and the surrounding land, not to exceed five acres, as is reasonably necessary for use of the dwelling as a home. A home may be part of a larger unit such as a farm or building partly rented or used for business. It may be a room in a nursing home, an apartment, or a mobile home unit.

Line 11 — Own Your Home

If you owned and occupied your home, include the amount of real estate tax you paid. **Do not include special assessments (sewer lateral), penalties, service charges, and interest listed on your tax receipt.** You can only claim the taxes on your primary residence that you occupy. Secondary homes do not apply.

If your home or farm has more than five acres or you own a mobile home and it is classified as personal property, a Form 948 Assessor's Certification must be attached with a copy of your paid personal/real property tax receipt.

Your county assessor will complete this form on your request. If you own a mobile home and it is classified as real property, a Form 948 is not needed. You can claim property tax and rent in such cases as a mobile home with pad/lot rent.

A credit **will not** be allowed on vehicles and other items listed on the personal property tax receipt.

Helpful Hint

Real estate tax paid for a **prior year cannot** be claimed on this form. To claim real estate taxes for a prior year, you must file a claim for that year.

If you own your home and other adults (other than spouse) live there and pay rent, the rent must be included in your federal adjusted gross income.

If you submit more than one receipt for a city or county for your residence, please submit a letter of explanation.

If you share a home, report only the portion of real estate tax that was actually paid by you.

If you sold/bought your home during the year, attach a copy of the seller's/ buyer's agreement to your claim.

Line 12 — Rent Your Home

Complete one Form MO-CRP, Certification of Rent Paid, for **each** rented home (including mobile home and/or lot) you occupied during 2009. The Form MO-CRP is on the back of the Form MO-PTS and instructions are on page 26.

If you rent from a facility that does not pay property taxes, you are not eligible for a Property Tax Credit.

Add the totals from Line 9 on all Form MO-CRP(s) completed and enter on Line 12. Attach rent receipt(s) for the whole year or each month or a signed statement from your landlord, along with Form MO-CRP. Copies of cancelled checks (front and back) will be accepted if your landlord will not provide rent receipts or statement.

Helpful Hint

If your rent is more than 60 percent of your income, you may qualify for housing assistance and you may be claiming the portion of your rent paid by a housing assistance program. Please claim only the amount of rent you pay or your refund will be delayed. If you do not qualify for housing assistance, please send an explanation of how additional rent is being paid.

You cannot claim returned check fees, late fees, security and cleaning deposits, or any other deposits. If your gross rent paid exceeds your household income, you must attach a detailed statement explaining how the additional rent was paid or the claim will be denied.

Helpful Hints

- An apartment is a room or suite of rooms with separate facilities for cooking and other normal household functions.
- A boarding home is a house that provides meals, lodging, and the residents share common facilities.

(If total yearly rent is more than Line 8, attach rent payment explanation.) Attach rent receipt(s) for the whole year or each month or a statement from your landlord, along with Form MO-CRP. Copies of cancelled checks (front and back) will be accepted if your landlord will not provide rent receipts, or statement.

Helpful Hint

Your property tax credit is figured by comparing your total income received to 20 percent of your net rent paid or real estate tax paid. To make the comparison and determine your credit, use the 2009 Property Tax Credit Chart on pages 27 through 29. Lines are provided on the chart to help you figure this amount.

Example: Ruth paid $1,200 in real estate tax and her total household income was $15,000. Ruth will apply her tax paid and her total household income to the chart to figure out her credit amount. Even though Ruth paid $1,200 in real estate tax, she is only allowed to take a credit of $1,100. Ruth will use $1,100 as tax paid and her total household income of $15,000 to make the comparison. When using the chart, Ruth finds where $15,000 and $1,100 "meet" to figure her credit. The two numbers "meet" on the chart where the credit amount is $1,059. Ruth will get a $1,059 credit for the real estate tax she paid.

Line 13 — Total Real Estate Tax / Rent Paid

Add amounts from Form MO-PTS, Lines 11 and 12 and enter amount on Line 13.

You can claim the amount of your real estate tax if you:

- owned your home/mobile home;
- owned your home for part of the year and rented for part of the year;
- owned/rented a mobile home and pad.

The maximum amount allowed is $1,100. If you rented, the maximum amount allowed is $750.

Helpful Hint

If you run a business in a portion of your home, the percentage of your home that is used for business purposes must be subtracted from your real estate taxes paid. This can be calculated on Form 948.

Example: Ruth has 10 acres surrounding her house. She needs to use a Form 948, because she is only entitled to receive credit for 5 acres. By her calculations, she enters $500 on Form 948, Line 6. Ruth also used 15% of her house for her business. She will multiply $500 by 85% and put this figure ($425) on Form MO-PTS, Line 11.

Line 14 — Property Tax Credit

Apply Lines 10 and 13 to the Property Tax Credit Chart on pages 27-29 to determine the amount of your property tax credit and enter amount on Line 14.

If you have another income tax or property tax credit liability, this property tax credit may be applied to that liability in accordance with Section 143.782, RSMo. You will be notified if your credit is offset against any debts.

Information to Complete Form MO-CRP

Step 1

Enter all information requested on Lines 1–5. If rent is paid to a relative, the relationship to the landlord must be indicated on Line 1. Your claim may be delayed if you fail to enter all required information.

Step 2

Enter on Line 6 the gross rent paid. Exclude rent paid for any portion of your home used in the production of income, and the rent paid for surrounding land with attachments not necessary nor maintained for homestead purposes. **Also, exclude any rent paid to your landlord on your behalf by any organization or agency.**

Step 3

If you were a resident of a nursing home or boarding home during 2009, use the applicable percentage in Line 7. If you live in a hotel and meals are included in your rent payment, enter 50 percent; otherwise enter 100 percent. If two or more unmarried individuals over 18 years of age share a residence and each pay part of the rent, enter the total rent on Form MO-CRP, Line 6 and mark the appropriate percentage on box G of Line 7. If the rent receipt is for the total rent amount, then the percentage on box G of the Form MO-CRP must be used to determine your credit.

Additional persons sharing rent/percentage to be entered: (1 person—50%, 2 people—33%, 3 people —25%). If none of the reductions apply to you, enter 100 percent on Line 7.

Step 4

Multiply Line 6 by the percentage on Line 7. Enter this amount on Form MO-CRP, Line 8.

Step 5

Multiply Line 8 by 20% and enter the result on Line 9. Add the totals from Line 9 on **all** completed Form MO-CRP(s) and enter the amount on Line 12 of MO-PTS.

Final Checklist Before Mailing Your Claim

Failure to include required documentation and/or information, may reduce or delay your refund.

NOTE: Be sure you and your spouse are eligible to claim the property tax credit.
Please read instructions if you have any doubt about what is required.

- ❑ **If you are age 65 or older:** Attach a copy of your Form SSA-1099 and/or RRB-1099.
- ❑ **If you are 100 Percent Disabled Veteran:** Attach a copy of the letter received from the Department of Veterans Affairs that states you are a 100 percent disabled as a result of military service, or references the Missouri Property Tax Credit. You can call the Department of Veterans Affairs at (800) 827-1000 to request the letter.
- ❑ **If you are 100 Percent Disabled:** Attach a copy of the letter from Social Security Administration and/or Form SSA-1099.
- ❑ **If you are 60 years of age or older and received surviving spouse benefits:** Attach a copy of Form SSA-1099.
- ❑ **If the Form MO-1040P and Form MO-PTS is being filed on behalf of a claimant,** a statement to that effect from the claimant's legal guardian (or Power of Attorney) must be attached.
- ❑ **If you owned and occupied your home:** Attach a copy of your **paid** 2009 real estate tax receipt(s).
- ❑ **If you owned and occupied your home and more than five acres:** Attach a copy of your **paid** 2009 real estate tax receipt(s) ***and*** a Form 948, Assessor's Certification.
- ❑ **If you owned and occupied a mobile home:** Attach a copy of your **paid** 2009 personal property/real estate tax receipt(s) **and** a Form 948, Assessor's Certification.

NOTE: Copies of cancelled checks and mortgage statements are not acceptable for your real estate tax receipt.

- ❑ **If you rent your home:** Fill out the 2009 Form MO-CRP, Certification of Rent Paid. (Attach a copy of the rent receipt(s) or a statement from your landlord to Form MO-CRP).

NOTE: If you rent from a facility that does not pay property taxes, you are not eligible for a Property Tax Credit.

- ❑ Sign Form MO-1040P. (Both spouses must sign if filing a combined claim.)
- ❑ Attach your Forms MO-1040P, MO-PTS, and supporting documentation and mail to:

If a refund is due or no amount due:
Department of Revenue
P.O. Box 2800
Jefferson City, MO 65105-2800

If you have a balance due:
Department of Revenue
P.O. Box 3395
Jefferson City, MO 65105-3395

A. Enter amount from Line 10 here _____ B. Enter amount from Line 13 here _____

C. Find where these two numbers "meet" below to figure your credit amount. Enter on Form MO-PTS, Line 14.

2009 PROPERTY TAX CREDIT CHART

AMOUNT FROM LINE B ABOVE OR FROM FORM MO-PTS, LINE 13 — TOTAL REAL ESTATE TAX PAID

		FROM						FROM						FROM	
		1076	1051	1026	1001	976	951	926	901	876	851	826	801	776	751
		TO						TO						TO	
		1100	1075	1050	1025	1000	975	950	925	900	875	850	825	800	775
FROM	**TO**	**Refund is the actual total amount of allowable real estate tax paid, not to exceed $1,100.**													
1	14,300	**NOTE: If you rent from a facility that does not pay property taxes, you are not eligible for a Property Tax Credit.**													
14,301	14,600	1078	1053	1028	1003	978	953	928	903	878	853	828	803	778	753
14,601	14,900	1069	1044	1019	994	969	944	919	894	869	844	819	794	769	744
14,901	15,200	1059	1034	1009	984	959	934	909	884	859	834	809	784	759	734
15,201	15,500	1049	1024	999	974	949	924	899	874	849	824	799	774	749	724
15,501	15,800	1039	1014	989	964	939	914	889	864	839	814	789	764	739	714
15,801	16,100	1028	1003	978	953	928	903	878	853	828	803	778	753	728	703
16,101	16,400	1016	991	966	941	916	891	866	841	816	791	766	741	716	691
16,401	16,700	1005	980	955	930	905	880	855	830	805	780	755	730	705	680
16,701	17,000	993	968	943	918	893	868	843	818	793	768	743	718	693	668
17,001	17,300	980	955	930	905	880	855	830	805	780	755	730	705	680	655
17,301	17,600	968	943	918	893	868	843	818	793	768	743	718	693	668	643
17,601	17,900	954	929	904	879	854	829	804	779	754	729	704	679	654	629
17,901	18,200	941	916	891	866	841	816	791	766	741	716	691	666	641	616
18,201	18,500	927	902	877	852	827	802	777	752	727	702	677	652	627	602
18,501	18,800	913	888	863	838	813	788	763	738	713	688	663	638	613	588
18,801	19,100	898	873	848	823	798	773	748	723	698	673	648	623	598	573
19,101	19,400	883	858	833	808	783	758	733	708	683	658	633	608	583	558
19,401	19,700	868	843	818	793	768	743	718	693	668	643	618	593	568	543
19,701	20,000	852	827	802	777	752	727	702	677	652	627	602	577	552	527
20,001	20,300	836	811	786	761	736	711	686	661	636	611	586	561	536	511
20,301	20,600	819	794	769	744	719	694	669	644	619	594	569	544	519	494
20,601	20,900	802	777	752	727	702	677	652	627	602	577	552	527	502	477
20,901	21,200	785	760	735	710	685	660	635	610	585	560	535	510	485	460
21,201	21,500	767	742	717	692	667	642	617	592	567	542	517	492	467	442
21,501	21,800	749	724	699	674	649	624	599	574	549	524	499	474	449	424
21,801	22,100	731	706	681	656	631	606	581	556	531	506	481	456	431	406
22,101	22,400	712	687	662	637	612	587	562	537	512	487	462	437	412	387
22,401	22,700	693	668	643	618	593	568	543	518	493	468	443	418	393	368
22,701	23,000	673	648	623	598	573	548	523	498	473	448	423	398	373	348
23,001	23,300	653	628	603	578	553	528	503	478	453	428	403	378	353	328
23,301	23,600	633	608	583	558	533	508	483	458	433	408	383	358	333	308
23,601	23,900	613	588	563	538	513	488	463	438	413	388	363	338	313	288
23,901	24,200	591	566	541	516	491	466	441	416	391	366	341	316	291	266
24,201	24,500	570	545	520	495	470	445	420	395	370	345	320	295	270	245
24,501	24,800	548	523	498	473	448	423	398	373	348	323	298	273	248	223
24,801	25,100	526	501	476	451	426	401	376	351	326	301	276	251	226	201
25,101	25,400	504	479	454	429	404	379	354	329	304	279	254	229	204	179
25,401	25,700	481	456	431	406	381	356	331	306	281	256	231	206	181	156
25,701	26,000	457	432	407	382	357	332	307	282	257	232	207	182	157	132
26,001	26,300	434	409	384	359	334	309	284	259	234	209	184	159	134	109
26,301	26,600	410	385	360	335	310	285	260	235	210	185	160	135	110	85
26,601	26,900	385	360	335	310	285	260	235	210	185	160	135	110	85	60
26,901	27,200	361	336	311	286	261	236	211	186	161	136	111	86	61	36
27,201	27,500	335	310	285	260	235	210	185	160	135	110	85	60	35	10
27,501	27,800	310	285	260	235	210	185	160	135	110	85	60	35	10	
27,801	28,100	284	259	234	209	184	159	134	109	84	59	34	9		
28,101	28,400	258	233	208	183	158	133	108	83	58	33	8			
28,401	28,700	231	206	181	156	131	106	81	56	31	6				
28,701	29,000	204	179	154	129	104	79	54	29	4					
29,001	29,300	177	152	127	102	77	52	27	2						
29,301	29,600	149	124	99	74	49	24								
29,601	29,900	121	96	71	46	21									
29,901	30,000	95	70	45	20										

A. Enter amount from Line 10 here _____ B. Enter amount from Line 13 here _____

C. Find where these two numbers "meet" below to figure your credit amount. Enter on Form MO-PTS, Line 14.

AMOUNT FROM LINE B ABOVE OR FROM FORM MO-PTS, LINE 13 — TOTAL REAL ESTATE TAX OR 20% OF RENT PAID

		FROM				FROM				FROM					
		726	701	676	651	626	601	576	551	526	501	476	451	426	401
		TO				TO				TO					
		750	725	700	675	650	625	600	575	550	525	500	475	450	425
FROM	TO	Refund is the actual total amount of allowable real estate tax paid, not to exceed $1,100 or rent credit equivalent not to exceed $750 (Form MO-PTS, Line 13). NOTE: If you rent from a facility that does not pay property taxes, you are not eligible for a Property Tax Credit.													
1	14,300														
14,301	14,600	728	703	678	653	628	603	578	553	528	503	478	453	428	403
14,601	14,900	719	694	669	644	619	594	569	544	519	494	469	444	419	394
14,901	15,200	709	684	659	634	609	584	559	534	509	484	459	434	409	384
15,201	15,500	699	674	649	624	599	574	549	524	499	474	449	424	399	374
15,501	15,800	689	664	639	614	589	564	539	514	489	464	439	414	389	364
15,801	16,100	678	653	628	603	578	553	528	503	478	453	428	403	378	353
16,101	16,400	666	641	616	591	566	541	516	491	466	441	416	391	366	341
16,401	16,700	655	630	605	580	555	530	505	480	455	430	405	380	355	330
16,701	17,000	643	618	593	568	543	518	493	468	443	418	393	368	343	318
17,001	17,300	630	605	580	555	530	505	480	455	430	405	380	355	330	305
17,301	17,600	618	593	568	543	518	493	468	443	418	393	368	343	318	293
17,601	17,900	604	579	554	529	504	479	454	429	404	379	354	329	304	279
17,901	18,200	591	566	541	516	491	466	441	416	391	366	341	316	291	266
18,201	18,500	577	552	527	502	477	452	427	402	377	352	327	302	277	252
18,501	18,800	563	538	513	488	463	438	413	388	363	338	313	288	263	238
18,801	19,100	548	523	498	473	448	423	398	373	348	323	298	273	248	223
19,101	19,400	533	508	483	458	433	408	383	358	333	308	283	258	233	208
19,401	19,700	518	493	468	443	418	393	368	343	318	293	268	243	218	193
19,701	20,000	502	477	452	427	402	377	352	327	302	277	252	227	202	177
20,001	20,300	486	461	436	411	386	361	336	311	286	261	236	211	186	161
20,301	20,600	469	444	419	394	369	344	319	294	269	244	219	194	169	144
20,601	20,900	452	427	402	377	352	327	302	277	252	227	202	177	152	127
20,901	21,200	435	410	385	360	335	310	285	260	235	210	185	160	135	110
21,201	21,500	417	392	367	342	317	292	267	242	217	192	167	142	117	92
21,501	21,800	399	374	349	324	299	274	249	224	199	174	149	124	99	74
21,801	22,100	381	356	331	306	281	256	231	206	181	156	131	106	81	56
22,101	22,400	362	337	312	287	262	237	212	187	162	137	112	87	62	37
22,401	22,700	343	318	293	268	243	218	193	168	143	118	93	68	43	18
22,701	23,000	323	298	273	248	223	198	173	148	123	98	73	48	23	
23,001	23,300	303	278	253	228	203	178	153	128	103	78	53	28	3	
23,301	23,600	283	258	233	208	183	158	133	108	83	58	33	8		
23,601	23,900	263	238	213	188	163	138	113	88	63	38	13			
23,901	24,200	241	216	191	166	141	116	91	66	41	16				
24,201	24,500	220	195	170	145	120	95	70	45	20					
24,501	24,800	198	173	148	123	98	73	48	23						
24,801	25,100	176	151	126	101	76	51	26	1						
25,101	25,400	154	129	104	79	54	29	4							
25,401	25,700	131	106	81	56	31	6								
25,701	26,000	107	82	57	32	7									
26,001	26,300	84	59	34	9										
26,301	26,600	60	35	10											
26,601	26,900	35	10												
26,901	27,200	11													
27,201	27,500														
27,501	27,800														
27,801	28,100														
28,101	28,400														
28,401	28,700														
28,701	29,000														
29,001	29,300														
29,301	29,600														
29,601	29,900														
29,901	30,000														

EXAMPLE:
If Line 10 is $23,980 and Line 13 of Form MO-PTS is $525, then the tax credit would be $16.

A. Enter amount from Line 10 here _____ B. Enter amount from Line 13 here _____

C. Find where these two numbers "meet" below to figure your credit amount. Enter on Form MO-PTS, Line 14.

AMOUNT FROM LINE B ABOVE OR FROM FORM MO-PTS, LINE 13 — TOTAL REAL ESTATE TAX OR 20% OF RENT PAID

		FROM					FROM								FROM		
		376	351	326	301	276	251	226	201	176	151	126	101	76	51	26	1
		TO					TO								TO		
		400	375	350	325	300	275	250	225	200	175	150	125	100	75	50	25
FROM	TO	Refund is the actual total amount of allowable real estate tax paid, not to exceed $1,100 or rent credit equivalent not to exceed $750 (Form MO-PTS, Line 13). NOTE: If you rent from a facility that does not pay property taxes, you are not eligible for a Property Tax Credit.															
1	14,300																
14,301	14,600	378	353	328	303	278	253	228	203	178	153	128	103	78	53	28	3
14,601	14,900	369	344	319	294	269	244	219	194	169	144	119	94	69	44	19	
14,901	15,200	359	334	309	284	259	234	209	184	159	134	109	84	59	34	9	
15,201	15,500	349	324	299	274	249	224	199	174	149	124	99	74	49	24		
15,501	15,800	339	314	289	264	239	214	189	164	139	114	89	64	39	14		
15,801	16,100	328	303	278	253	228	203	178	153	128	103	78	53	28	3		
16,101	16,400	316	291	266	241	216	191	166	141	116	91	66	41	16			
16,401	16,700	305	280	255	230	205	180	155	130	105	80	55	30	5			
16,701	17,000	293	268	243	218	193	168	143	118	93	68	43	18				
17,001	17,300	280	255	230	205	180	155	130	105	80	55	30	5				
17,301	17,600	268	243	218	193	168	143	118	93	68	43	18					
17,601	17,900	254	229	204	179	154	129	104	79	54	29	4					
17,901	18,200	241	216	191	166	141	116	91	66	41	16						
18,201	18,500	227	202	177	152	127	102	77	52	27	2						
18,501	18,800	213	188	163	138	113	88	63	38	13							
18,801	19,100	198	173	148	123	98	73	48	23								
19,101	19,400	183	158	133	108	83	58	33	8								
19,401	19,700	168	143	118	93	68	43	18									
19,701	20,000	152	127	102	77	52	27	2									
20,001	20,300	136	111	86	61	36	11										
20,301	20,600	119	94	69	44	19											
20,601	20,900	102	77	52	27	2											
20,901	21,200	85	60	35	10												
21,201	21,500	67	42	17													
21,501	21,800	49	24														
21,801	22,100	31	6														
22,101	22,400	12															
22,401	22,700																
22,701	23,000																
23,001	23,300																
23,301	23,600																
23,601	23,900																
23,901	24,200																
24,201	24,500																
24,501	24,800																
24,801	25,100																
25,101	25,400																
25,401	25,700																
25,701	26,000																
26,001	26,300																
26,301	26,600																
26,601	26,900																
26,901	27,200																
27,201	27,500																
27,501	27,800																
27,801	28,100																
28,101	28,400																
28,401	28,700																
28,701	29,000																
29,001	29,300																
29,301	29,600																
29,601	29,900																
29,901	30,000																

This area indicates no credit is allowable.

EXAMPLE:
If Line 10 is $19,360 and Line 13 of Form MO-PTS is $225, then the tax credit would be $8.

2009 Missouri School District Numbers

Your Missouri school district number **must be entered on your income tax return.** This information is supplied to the State Department of Elementary and Secondary Education and is used in determining the amount of state aid to your school district.

Enter the number of the public school district where your residence is located.

The Missouri public school district names and numbers are listed alphabetically by school district name. Generally, the name of your public school district is also the name of the city, town, or village where your public school is located.

Do not write the name of the school district on the return. Enter only the number of the district in the following list. For example:

- All public schools located in the City of Springfield are in "Springfield R-XII" School District, and number "475" should be entered in the space provided.
- All public schools located in the City of Columbia are in "Columbia 93" School District, and number "098" should be entered in the spaces provided.

The following should be considered in determining your public school district number:

1. **Determine your public school district at the time of completing your return.**
2. If you live in one school district and work or have a permanent or temporary mailing address in another, enter the district number where you live.
3. If you are in a military service or a student temporarily living and working away from your permanent residence, enter the district number of your permanent residence.
4. If you were a part-year resident of Missouri, enter the school district number of your residence while living in Missouri.
5. If you are a "nonresident" of Missouri, your school district number is "347".

If you are unable to determine your school district number from these instructions, call the public elementary or public high school of your school district.

NAME	NUMBER
Adair Co. R-I (Novinger)	365
Adair Co. R-II (Brashear)	045
Adrian R-III	001
Advance R-IV	002
Affton 101	003
Albany R-III	004
Altenburg 48	005
Alton R-IV	006
Appleton City R-II	008
Arcadia Valley R-II (Ironton)	009
Archie R-V	010
Ash Grove R-IV	011
Atlanta C-3	012
Aurora R-VIII	013
Ava R-I	014
Avenue City R-IX	015
Avilla R-XIII	016
Bakersfield R-IV	017
Ballard R-II	018
Bayless	019
Bell City R-II	020
Belleview R-III	022
Belton 124	023
Bernie R-XIII	025
Bevier C-4	026
Billings R-IV	029
Bismarck R-V	030
Blackwater R-II	031
Blair Oaks	097
Bloomfield R-XIV	033
Blue Eye R-V	034
Blue Springs R-IV	035
Bolivar R-I	037
Boncl R-X	038
Boonville R-I	039
Bosworth R-V	040
Bowling Green R-I	042
Bradleyville R-I	043
Branson R-IV	044
Braymer C-4	046
Breckenridge R-I	047
Brentwood	048
Bronaugh R-VII	049
Brookfield R-III	050
Brunswick R-II	052
Buchanan Co. R-IV (DeKalb)	115
Bucklin R-II	053
Bunker R-III	055
Butler R-V	056
Cabool R-IV	057
Cainsville R-I	058
Calhoun R-VIII	059
Callao C-8	061
Camdenton R-III	062
Cameron R-I	063
Campbell R-II	064
Canton R-V	065
Cape Girardeau 63	066
Carl Junction R-I	067
Carrollton R-VII	068
Carthage R-IX	069
Caruthersville 18	070
Cassville R-IV	071
Center 58 (Jackson County)	074
Centerville R-I	077
Central R-III (Park Hills)	480
Centralia R-VI	079
Chadwick R-I	080
Chaffee R-II	081
Charleston R-I	083
Chilhowee R-IV	084
Chillicothe R-II	085
Clark Co. R-I (Kahoka)	230
Clarksburg C-2	087
Clarkton C-4	088
Clayton	089
Clearwater R-I	090
Clever R-V	091
Climax Springs R-IV	092
Clinton	093
Clinton Co. R-III (Plattsburg)	397
Cole Camp R-I	096
Cole Co. R-I (Russellville)	432
Cole Co. R-V (Eugene)	136
Columbia 93	098
Community R-VI	099
Concordia R-II	101
Cooper Co. R-IV (Bunceton)	054
Cooter R-IV	103
Couch R-I	104
Cowgill R-VI	105
Craig R-III	106
Crane R-III	107
Crawford Co. R-I (Bourbon)	041
Crawford Co. R-II (Cuba)	108
Crocker R-II	109
Crystal City 47	110
Dadeville R-II	111
Dallas Co. R-I (Buffalo)	112
Davis R-XII	113
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Missouri Department of Revenue Tax Assistance Centers

Public hours Monday through Friday at the offices listed below are:

January through April 7:30 a.m. to 5:30 p.m.

May through December 8:00 a.m. to 5:00 p.m.

Individuals with speech or hearing impairments may use TDD(800) 735-2966 or fax (573) 526-1881.

Cape Girardeau
3102 Blattner Dr., Suite 102
(573) 290-5850

Jefferson City
301 West High St., Room 330
(573) 751-7191

Joplin
1110 East 7th St., Suite 400
(417) 629-3070

Kansas City
615 East 13th St., Room 127
(816) 889-2920

Springfield
149 Park Central Square, Room 313
(417) 895-6474

St. Louis
3256 Laclede Station Rd., Suite 101
(314) 877-0177

St. Joseph
525 Jules, Room 314
(816) 387-2230

Other Important Phone Numbers

Forms-by-Fax	(573) 751-4800	Automated IVR Refund/Balance Due Inquiry	(573) 526-8299
General Inquiry Line	(573) 526-8942	Electronic Filing Information	(573) 751-3930

Download forms or check the status of your return from our web site: www.dor.mo.gov/tax
Suggestions for Improvements to Forms and Instructions e-mail: **taxsuggest@dor.mo.gov**
Property Tax Credit e-mail: **propertytaxcredit@dor.mo.gov**

Federal Privacy Notice

The Federal Privacy Act requires the Missouri Department of Revenue (Department) to inform taxpayers of the Department's legal authority for requesting identifying information, including social security numbers, and to explain why the information is needed and how the information will be used.

Chapter 143 of the Missouri Revised Statutes authorizes the Department to request information necessary to carry out the tax laws of the state of Missouri. Federal law 42 U.S.C. Section 405 (c)(2)(C) authorizes the states to require taxpayers to provide social security numbers.

The Department uses your social security number to identify you and process your tax returns and other documents, to determine and collect the correct amount of tax, to ensure you are complying with the tax laws, and exchange tax information with the Internal Revenue Service, other states, and the Multistate Tax Commission (Chapters 32 and 143, RSMo). In addition, statutorily provided non-tax uses are: (1) to provide information to the Department of Higher Education with respect to applicants for financial assistance under Chapter 173, RSMo and (2) to offset refunds against amounts due to a state agency by a person or entity (Chapter 143, RSMo). Information furnished to other agencies or persons shall be used solely for the purpose of administering tax laws or the specific laws administered by the person having the statutory right to obtain it as indicated above. (For the Department's authority to prescribe forms and to require furnishing of social security numbers, see Chapters 135, 143, and 144, RSMo.)

You are required to provide your social security number on your tax return. Failure to provide your social security number or providing a false social security number may result in criminal action against you.
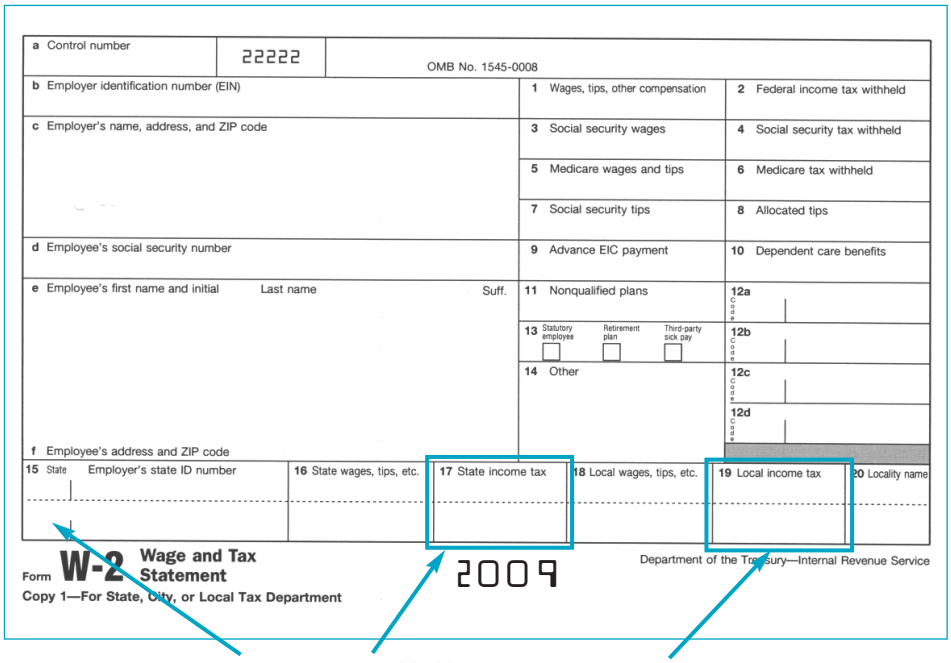
Diagram: Form W-2