



MISSOURI DEPARTMENT OF

REVENUE**Homestead Disaster Tax Credit Affidavit****Claimant Information**

Name (Primary)

Social Security Number

<input type="text"/>							
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Name (Spouse)

Social Security Number

<input type="text"/>							
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Address of the homestead that suffered damage

Street Address (Include Apartment Number or Rural Route)

County

City, Town, or Post Office

State

Zip Code

Is this your primary residence? Yes NoHave you been living there for more than 6 months? Yes NoIs this address used for tax and legal purposes? Yes NoWas the deductible incurred during the 2025 tax year? Yes No

Date of Disaster (MM/DD/YYYY)

 / / **Insurance Information**

Insurance Company (Company issuing the policy/paying the claim.)

Company Code (CoCode)

Group Code

Policy Number

Amount of Deductible (Incurred by Policy Holder)

\$

Signature(s)

Under penalty of perjury, I affirm that I meet the definition of an Individual Taxpayer as defined in [Section 135.445, RSMo](#), as imposed under Chapter 143. I declare that I have examined this return to the best of my knowledge and belief it is true, correct, and complete. By signing or entering my name in the "Signature" field(s) below, I am providing the Department of Revenue with my signature as required under Section 135.445, RSMo.

Primary's Signature

Printed Name

Date (MM/DD/YYYY)

 / /

Spouse's Signature

Printed Name

Date (MM/DD/YYYY)

 / / **Mail To:** Taxation Division

P.O. Box 27

Jefferson City, MO 65105-0027

Phone: (573) 751-3220**Fax:** (573) 522-8619**E-mail:** taxcredit@dor.mo.govVisit dor.mo.gov/tax-credits/

for additional information.

Form 5926 (Revised 01-2025)

Ever served on active duty in the United States Armed Forces?

If yes, visit dor.mo.gov/military/ to see the services and benefits DOR offers to all eligible military individuals, or complete the survey at mvc.dps.mo.gov/MoVeteransInformation/Survey/DOR to receive information from the Missouri Veterans Commission. A list of all state agency resources and benefits can be found at veteranbenefits.mo.gov/state-benefits/.



Homestead Disaster Tax Credit (2025)

The Homestead Disaster Tax Credit provides financial relief to Missouri residents who incurred an insurance deductible on their primary residence due to a qualifying disaster in 2025.

You may be eligible if:

- In 2025, you incurred an insurance deductible for damage to your primary residence (homestead).
- The damage was caused by a disaster for which the Governor of Missouri requested a presidential disaster declaration in 2025.
- The residence was your legal and tax address, and you lived there for at least six months prior to the disaster.
- Your insurance company is licensed in the state of Missouri.

Tax credit information:

- The credit equals the amount of your insurance deductible incurred during the 2025 tax year, up to \$5,000.
- The credit is non-refundable and it cannot exceed your tax liability.
- Any unused portion may be carried forward for up to 29 years or until fully used.
- The credit cannot be sold, transferred, or assigned.
- No new credits will be authorized after October 15, 2026.

Affidavit Filing Instructions

To claim the credit, you must submit Form MO-TC, a letter from the insurance company, and the signed affidavit Form 5926 with your individual income tax return. The affidavit must include the following:

Claimant Information:

- Address of the damaged homestead, including county.
- Must be your primary residence at the time of the disaster.
- You must have lived there for more than six months.
- The address must be used for legal and tax purposes.
- The insurance deductible must have been incurred in the 2025 tax year.
- Date of the disaster

Insurance Information:

- Name of the insurance company that paid the claim.
- The insurance company's Company Code (CoCode) and the Group Code assigned by the National Association of Insurance Commissioners (NAIC).
- Policy number
- Amount of the deductible you incurred. Attach insurance company documentation.

Signature Section:

- Include your printed name, signature, and date
- If filing jointly, both primary taxpayer and spouse must sign.
- Signing affirms that you have read and understood [Section 135.445, RSMo](#) under Chapter 143.