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MISSOURI DEPARTMENT OF REVENUE

Department Use Only

☒ DO Automatic Calculations

☐ DON'T DO Automatic Calculations

Form MO-1040A

2024 Individual Income Tax Return Single/Married (One Income)

Print in BLACK ink only and DO NOT STAPLE.
For Privacy Notice, see Instructions.

☐ Federal Extension - Select this box if you have an approved federal extension. Attach a copy Federal Extension (Form 4868).

☐ Department of Social Services Application of Eligibility form attached.

Vendor Code: 006

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Filing Status

☐ Single ☐ Claimed as a Dependent ☐ Married Filing Combined ☐ Married Filing Separately ☐ Head of Household ☐ Qualifying Widow(er)

Select the appropriate boxes that apply.

Age 65 or Older	Blind	100% Disabled	Non-Obligated Spouse
Yourself ☐ Spouse ☐	Yourself ☐ Spouse ☐	Yourself ☐ Spouse ☐	Yourself ☐ Spouse ☐

Name

Social Security Number - - | Deceased in 2024 ☐ | Spouse's Social Security Number - - | Deceased in 2024 ☐

First Name | M.I. | Last Name | Suffix

Spouse's First Name | M.I. | Spouse's Last Name | Suffix

In Care Of Name (Attorney, Executor, Personal Representative, etc.) Attach form if applicable.

Address

Present Address (Include Apartment Number or Rural Route)

City, Town, or Post Office | State | ZIP Code –

County of Residence

SELECT COUNTY

You may contribute to any one or all of the trust funds on Line 16. See instructions for more trust fund information.

Medal of Honor Fund	Children's Trust Fund	Veterans Trust Fund	Elderly Home Delivered Meals Trust Fund	Missouri National Guard Trust Fund	Workers' Memorial Fund	Childhood Lead Testing Fund	Missouri Military Family Relief Fund	General Revenue Fund	Organ Donor Program Fund	Kansas City Regional Law Enforcement Memorial Foundation Fund	Soldiers Memorial Military Museum in St. Louis Fund

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Income

1. Federal adjusted gross income from federal return (see page 6 of the instructions) . . . . . 1 .00 Line 1

2. Any state income tax refund included in federal adjusted gross income . . . . . 2 .00 Line 2

3. Total Missouri adjusted gross income. . . . . 3 0 .00

Deductions

4a. Tax from federal return. Do not enter federal income tax withheld. 4a .00

4b. Federal tax percentage – Enter the percentage based on your Missouri Adjusted Gross Income, Line 3. Use the chart below to find your percentage. . . . . 4b %

Missouri Adjusted Gross Income Range, Line 3:	Federal Tax Percentage:
$25,000 or less	35%
$25,001 to $50,000	25%
$50,001 to $100,000	15%
$100,001 to $125,000	5%
$125,001 or more	0%

4c. Federal income tax deduction – Multiply Line 4a by the percentage on Line 4b. Enter this amount not to exceed $5,000 for an individual or $10,000 for combined filers . . . . . 4c 0 .00 Line 4

5. Missouri standard deduction or itemized deductions.
   - Single or Married Filing Separate - $14,600
   - Head of Household - $21,900
   - Married Filing Combined or Qualifying Widow(er) - $29,200

   Itemized Worksheet

   If age 65 or older, blind, or claimed as a dependent, see federal return or page 6.
   If itemizing, see page 14 . . . . . 5 0 .00 Line 5

6. Additional Exemption for Head of Household and Qualifying Widow(er) . . . . . 6 0 .00

7. Long-term care insurance deduction . . . . . 7 .00 Line 7

8. Total Deductions - Add Lines 4c through 7 . . . . . 8 0 .00

Tax

9. Missouri Taxable Income - Subtract Line 8 from Line 3. . . . . 9 0 .00

10. Tax - Use the tax chart on page 10 to figure the tax . . . . . 10 0 .00 Line 10

Refund

11. Missouri tax withheld from Form(s) W-2 and 1099.
    Attach copies of Form(s) W-2 and 1099 . . . . . 11 .00 Line 11

12. Missouri estimated tax payments made for 2024.
    Include overpayment from 2023 applied to 2024. . . . . 12 .00 Line 12

13. Total Payments - Add Lines 11 and 12 . . . . . 13 0 .00

14. If Line 13 is more than Line 10, enter the difference. This is your overpayment.
    If Line 13 is less than Line 10, skip to Line 19 . . . . . 14 0 .00

15. Amount from Line 14 that you want applied to your 2025 estimated tax . . . . . 15 .00 Line 15

16. Enter the amount of your donation in the trust fund boxes below (see instructions for trust fund codes.)

16a. Children's Trust Fund .00 16b. Veterans Trust Fund .00 16c. Elderly Home Delivered Meals Trust Fund .00 16d. Missouri National Guard Trust Fund .00

16e. Workers' Memorial Fund .00 16f. Childhood Lead Testing Fund .00 16g. Missouri Military Family Relief Fund .00 16h. General Revenue Fund .00

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Refund (continued)

16i. Organ Donor Program Fund . 00 | 16j. Kansas City Regional Law Enforcement Memorial Foundation Fund 00 | 16k. Soldiers Memorial Military Museum in St. Louis Fund 00 | 16l. Medal of Honor 00

16m. Additional Fund Code / Additional Fund Amount . 00 | 16n. Additional Fund Code / Additional Fund Amount . 00

Total Donation - Add amounts from Boxes 16a through 16n and enter here . . . . . 16 0 . 00 Line 16

17. Amount from Line 14 to be deposited into a Missouri 529 Education Plan (MOST) account. Enter amount from Line E of **Form 5632**. . . . . MOST 17 0 . 00

18. **REFUND** - Subtract Lines 15, 16, and 17 from Line 14 and enter here. . . . . 18 0 . 00 Line 18

a. Routing Number

b. Account Number

c. ☐ Checking ☐ Savings

Amount Due

19. **AMOUNT DUE** - If Line 13 is less than Line 10, enter the difference here . . . . . 19 0 . 00

If you pay by check, you authorize the Department to process the check electronically. Any returned check 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. 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 143.561, RSMo.** Declaration of preparer (other than taxpayer) is based on all information of which he or she has 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.

Signature | Date (MM/DD/YY)

Spouse's Signature (If filing combined, BOTH must sign) | Date (MM/DD/YY)

E-mail Address | Daytime Telephone

M1

Preparer's Signature | Date (MM/DD/YY)

Preparer's FEIN, SSN, or PTIN | Preparer's Telephone

Preparer's Address | State | ZIP Code

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

Did you pay a tax return preparer to complete your return, but the preparer failed to sign the return or provide an Internal Revenue Service preparer tax identification number? If you marked yes, please insert the preparer's name, address, and phone number in the applicable sections of the signature block above. . . . . ☐ Yes ☐ No

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Click here to finish

☐ A ☐ FA E10 ☐ DE ☐ F

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Missouri Itemized Deductions

- Complete this section only if you itemized deductions on your federal return (see the information on pages 6, 8 and 9).
- Attach a copy of your Federal Form 1040 or 1040-SR (pages 1 and 2) and Federal Schedule A.
- If you are subject to "additional Medicare tax", attach a copy of Federal Form 8959.

1.	Total federal itemized deductions (from Federal Form 1040 or 1040-SR, Line 12)	1	.00	Line 1
2.	2024 Social security tax	2	.00	Line 2
3.	2024 Railroad retirement tax (Tier I and Tier II)	3	.00	Line 3
4.	2024 Medicare tax (see instructions on page 8)	4	.00	Line 4
5.	2024 Self-employment tax (see instructions on page 9)	5	.00	Line 5
6.	Total - Add Lines 1 through 5	6 0	.00	
7.	State and local income taxes from Federal Schedule A, Line 5a or Enter $0 if completing the worksheet below	7	.00	Line 7
8.	Earnings taxes included in Line 7 (see instructions on page 9)	8	.00	Line 8
9.	Net state income taxes - Subtract Line 8 from Line 7 or enter Line 7 from worksheet below	9 0	.00	
10.	Missouri Itemized Deductions - Subtract Line 9 from Line 6. Enter here and on Form MO-1040A, Line 5	10 0	.00	Line 10

☐ Carry amount to 1040A Line 5

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

Worksheet for Net State Income tax, Line 9 of Missouri Itemized Deductions

Complete this worksheet only if your total state and local taxes included in your federal itemized deductions (Federal Schedule A, Line 5d) exceeds $10,000 (or $5,000 for married filing separate taxpayers).

1.	Enter the sum of your state and local taxes on Federal Form 1040 or 1040-SR, Schedule A, Line 5d	1	.00	
2.	State and local income taxes from Federal Form 1040 or 1040-SR, Schedule A, Line 5a	2	.00	
3.	Earnings taxes included on Federal Form 1040 or 1040-SR, Schedule A, Line 5a	3	.00	
4.	Subtract Line 3 from Line 2	4 0	.00	
5.	Divide Line 4 by Line 1	5	%	
6.	Enter $10,000 ($5,000 if married filing separately)	6 10,000	.00	
7.	Multiply Line 6 by percentage on Line 5. Enter here and on Missouri Itemized Deductions, Line 9, above	7 0	.00	

Reset Worksheet ☐ Use data from worksheet

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Mail to:

Balance Due:
Missouri Department of Revenue
P.O. Box 3370
Jefferson City, MO 65105-3370
Phone: (573) 751-5860

Refund or No Amount Due:
Missouri Department of Revenue
P.O. Box 3222
Jefferson City, MO 65105-3222
Phone: (573) 751-3505

Fax: (573) 522-1762
Email: incometaxprocessing@dor.mo.gov
Submission of Individual Income Tax returns
Email: income@dor.mo.gov
Inquiry and correspondence

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/.

Visit: dor.mo.gov/taxation/individual/tax-types/income/ for additional information.

2024 Tax Chart

To identify your tax, use your Missouri taxable income from **Form MO-1040A**, Line 9 and the tax chart in Section A below. A separate tax must be computed for you and your spouse.

Calculate your Missouri tax using the online tax calculator at **dor.mo.gov/personal/individual/** or by using the worksheet in Section B below. Round to the nearest whole dollar and enter on Form MO-1040A, Line 10.

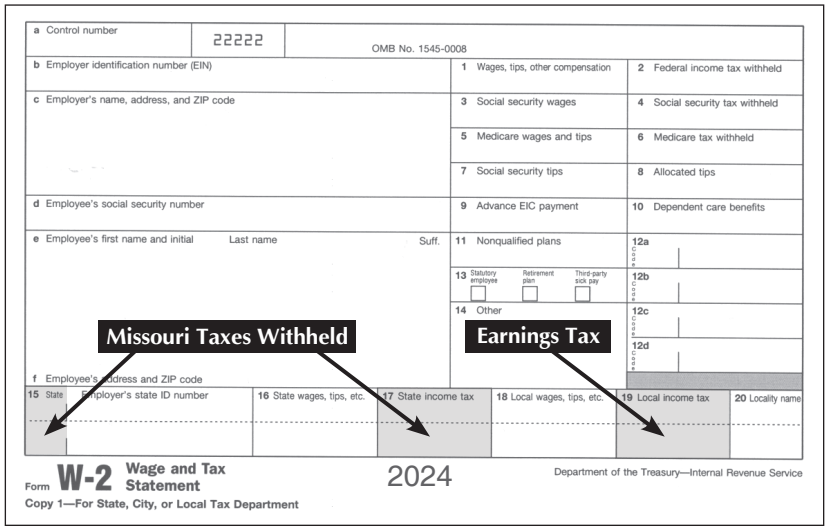
Section A — Tax Rate Chart

If the Missouri taxable income is:	The tax is:
$0 to $1,273	$0
Over $1,273 but not over $2,546	2.00% of excess over $1,273
Over $2,546 but not over $3,819	$25 plus 2.50% of excess over $2,546
Over $3,819 but not over $5,092	$57 plus 3.00% of excess over $3,819
Over $5,092 but not over $6,365	$95 plus 3.50% of excess over $5,092
Over $6,365 but not over $7,638	$140 plus 4.00% of excess over $6,365
Over $7,638 but not over $8,911	$191 plus 4.50% of excess over $7,638
Over $8,911	$248 plus 4.80% of excess over $8,911

Section B — Tax Calculation Worksheet

		Yourself		Spouse		Example A		Example B
1. Missouri taxable income (Form MO-1040A, Line 9)	$	0				$ 3,090	$	12,000
2. Enter the minimum taxable income for your tax bracket (see Section A above). If below $1,273 enter $0	- $	0				- $ 2,546	$	8,911
3. Difference - Subtract Line 2 from Line 1	= $	0				= $ 544	$	3,089
4. Enter the percent for your tax bracket (see Section A above)	X	0.00	%		%	X 2.5%		4.8%
5. Multiply Line 3 by the percent on Line 4	= $	0.00				= $ 13.60	$	148.27
6. Enter the tax from your tax bracket - before applying the percent (see Section A above)	+ $	0				+ $ 25	$	248
7. Total Missouri Tax - Add Line 5 and 6. Enter here and on Form MO-1040A, Line 10	= $	0				= $ 39	$	396
						($38.60 rounded to the nearest dollar)		($396.27 rounded to the nearest dollar)

Diagram 1: Form W-2



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MISSOURI DEPARTMENT OF REVENUE

Form **5632**

2024 MOST - Missouri's 529 Education Plan Direct Deposit Form - Individual Income Tax

Department Use Only (MM/DD/YY)

Taxpayer

Social Security Number - -

Spouse's Social Security Number - -

First Name | M.I. | Last Name | Suffix

Spouse's First Name | M.I. | Spouse's Last Name | Suffix

Requirements

If you want to deposit your refund as a contribution to one or more Missouri MOST 529 Education Plan accounts:

- You must have an open Missouri MOST 529 Education Plan account that is administered by the Missouri Education Program. See the contact information below.
- Your total deposit must be at least $25.
- If your overpayment is adjusted and the amount you requested to deposit exceeds your available refund, the Department will cancel your deposit and issue a refund to you.
- If your refund is offset to pay another debt, the Department will cancel your deposit.

529 Account

Enter the 11-digit MOST 529 account number and the amount you want contributed to each account. (You may contribute to a maximum of four accounts.)

	Account Number	Amount
A)	–	.00
B)	–	.00
C)	–	.00
D)	–	.00

Add the amounts from Line A through Line D and enter the total deposit amount here and on Form MO-1040, Line 52 or Form MO-1040A, Line 17.. . . . . Total Deposit $0.00

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Contact Information

MOST-Missouri's 529 Education Plan
missourimost.org
Telephone: (888) 414-6678
E-mail: most529@missourimost.org

Ever served on active duty in the United States Armed Forces?
If yes, visit **dor.mo.gov/military/** to see the services and benefits we offer to all eligible military individuals. A list of all state agency resources and benefits can be found at **veteranbenefits.mo.gov/state-benefits/**.

If you wish to deposit all or a portion of your refund into a Missouri MOST 529 Education Plan, you must include this form with your Missouri Individual Income Tax Return.