

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

## **2009** FORM MO-1040P

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LAS	T NAME		FIRST NAME		MIDDLE INITIA	AL	DECEAS	SED S	SOCIAL SECU	JRITY NUMBER		SOFTWARE VENDOR CODE (Assigned by DOR)
SPO	USE'S I	LAST NAME	FIRST NAME		MIDDLE INITIA	AL	DECEA	SED S 2009	SPOUSE'S SC	DCIAL SECURITY NUM	MBER	002
IN C	ARE OF	F NAME (ATTORNEY, EXECUTOR, PE	RSONAL REPRESENTATIVE,	ETC.)		COUN	ITY OF F	RESIDEN	NCE		SCHOOL DISTRI	CT NO. (PG. 30, 31)
PRE	SENT A	ADDRESS (INCLUDE APARTMENT NO	). OR RURAL ROUTE)		APT. NUMBER	CITY,	TOWN,	OR POS	ST OFFICE, S	TATE, AND ZIP CODE		
	05.5	o TUDQUQU CA		HE APPROPRIATE BOXES	THAT APPLY T						NIOATED CO	NICE
<u> </u>		<u>2 THROUGH 64</u> URSELF	AGE 65 OR OLDER  YOURSELF	BLIND YOURSEL	F		<u>% DIS.</u> Yours		<u>D</u>		<b>BLIGATED SPO</b> RSELF	DUSE
	_	OUSE	SPOUSE	SPOUSE		_	SPOUS			☐ SPO		
of the	the tri right ntribu	y contribute to any one or a ust funds that are listed to Place the total amount ted on Line 24. See the ons for a list of Trust Fund	Children's	Veterans Elderly Hon Delivered Meals	Missouri National Guard	Workers	Worker Memor	(Lb	Childho Lead Testing	od Missouri Military Family Relief	General Revenue	After School Retreat
	1	Federal Adjusted Gross	Income from your 20	200 fodoral ratura					You	rself	Sp	ouse
		(See worksheet on page 8					1			00		00
Щ	2.	Any state income tax refun	d included in your 200	9 federal income			2	-		00	_	00
INCOME	3.	Subtract Line 2 from Line	1. This is your Misso	ouri adjusted gross incon	ne		3	=		00	=	00
=	4.	TOTAL MISSOURI ADJU	ISTED GROSS INCO	DME — Add both numbe	rs on Line 3 and	d ente	er her	e	4		00	,
		Income percentages — Di	vide Line 3 by Line 4	for both you and your spo	ouse.		27.			%		1
	6	(The total of the two must Mark your filing status bo			<u> </u>	 e 6			5	70	%	1
		□ A. Single — \$2,100     □ B. Claimed as a dep tax return — \$0.0     □ C. Married filing joint □ D. Married filing sep  Tax from federal return (Denter amount from your Form federal tax withheld.)	(See Box B before contendent on another performance of the second of the	erson's federal issouri — \$4,200  Sin Ma	E. Married filin NOT filing)  F. Head of head	ng sep ) — \$4 ouseh widow t child of \$5, ined—	1,200 nold — v(er) v — \$3 000; -maxir	- \$3,5 vith <b>,,500</b> mum	6	+	00	See Page 6,
DEDUCTIONS AND TAXABLE INCOME	8.	Missouri Standard or Itemi  Taxpayers Under Age 6 Single	<u>5</u> \$5,700 \$11,400 \$5,700 \$8,350 \$11,400	Taxpayers Age 65 or Single	Older d and YOU are d and You are the Younge 65 or Older	Age Your	\$12 \$13 \$6 \$9	7,100 2,500 3,600 5,800 9,750 2,500				If 65 or older and/or blind the appropriate boxes must be checked above.
DEDNC		If blind, claimed as a depe your federal return, page 6 Form MO-1040P	of the instructions, or	page 4 of the Form MO-1	040P. If itemizing	ng, se	e page	e 4 of	the	+	00	Do not include yourself or
	9.	Number of dependents fr (DO NOT INCLUDE YOU			x \$1,200	)			9	+	00	your spouse.
	10.	Pension exemption (Comon page 3, a copy of fed							10	+	00	
	11.	Long-term care insurance									00	1
		TOTAL DEDUCTIONS –									00	7
1		Missouri Taxable Incom and enter here.	e — Subtract Line 12	(Total Deductions) from	Line 4 (Total Mi	issour	i Incor	me)			00	_

	14.	Total Missouri taxable an	nount from L	_ine 13						14			00			
(ES	15.	Multiply Line 14 by the pe Do this for you and your s	ercentages y spouse	you determin	ed on Line	5.		15	`	You	self	00	Sp	ouse	00	
TAXES	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											00			00	
	17.	TOTAL TAXES — Add y	our tax and	your spouse	e's tax from	Line 16				17			00			
	18.	Missouri withholding for y and 1099(s). Attach cop	ou and you oies of Forr	r spouse from	m your Forr nd 1099(s).	ms W-2(s)				18			00			
PAYMENTS/CREDITS	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.)												00			
PAYME	20. PROPERTY TAX CREDIT — Enter amount from Form MO-PTS, Line 14. Attach Form MO-PTS.												00	<u> </u>		
	21.	TOTAL PAYMENTS AND Add Lines 18, 19, and 20								21			00			
	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.												00			
OND	23. Enter the amount from Line 22 you want applied to <b>next year's</b> taxes									23			00			
PAYMENTS/REFUND		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	Children's	Veterans (	Elderly Home Delivered Meals	Guard	Workers' Memorial	Childhood Lead Testing	Family Relief	₹ G. R.	General Revenue	<b>\$</b>	School Fund	Trust Code Instr.)	Addl. Trust Fund Code (See Instr.)	
	25.	Subtract Lines 23 and 24	1 from Line 2	22 and enter	here. This	is your refu	und. Sign bel	ow and	<u> </u>		ļoo		-	T	انات	
MAIL TO		mail to: Department of F  If Line 21 is less than Line mail to: Department of R	e 17, enter th	ne difference	here. You	have an ar	mount due. <b>Si</b>	gn below a	nd				00			
L	If y	ou pay by check, you authorder penalties of perjury, I declare	rize the Dep	artment of Re	evenue to pr	ocess the c	heck electroni	cally. Any c	heck retur	ned u						
	Dec indi cred	claration of preparer (other than tail ividual who files a frivolous return. dit or abatement if I employ such a	axpayer) is bat I also declare aliens.	sed on all inforr under penalties	mation of whic of perjury that	h he/she has I employ no il	any knowledge. A legal or unauthoriz	s provided in	Chapter 143	, RSM federa	o, a penalty I law and th	y of up to nat I am no	\$500 shall be at eligible for a	impos	ed on any	
URE	and	I authorize the Director of Revenue or delegate to discuss my return and attachments with the preparer or any member of the preparer's									PREPARER'S PHONE NUMBER					
SIGNATUR	firm.	IATURE		ES L NO	DATE		PREPARER'S	SIGNATURE		(	)		FEIN, SSN, (	OR PTIN		
	SPOU	SPOUSE'S SIGNATURE DAYTIME TELEPHONE PREPARER'S ADDRESS AND ZIP CODE									DATE					

FORM MO-1040P

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, sta	ate, c	or local governm	ent.			
	Enter your Missouri Adjusted Gross Income from Form MO-1040P, Line 4.	1				00	
	2. Enter your <b>taxable</b> 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	;				
			Y - YOURSELF		S - SPOUSE		
<b>SECTION A</b>	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		6S		00	
	7. Multiply Line 6 by 50%	7Y	00	7S		00	
SECT	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	88		00	
0,	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	118		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) p		s, deferred com	pens	ation plans	,	
	self-employed retirement plans, and IRA's funded by a private source.						
	Enter your Missouri Adjusted Gross Income from Form MO-1040P, Line 4	1				00	
	2. Enter your <b>taxable</b> social security benefits from federal Form 1040A, Line 14b or federal Form 1040, Line 20b	1 1			00		
	3. Subtract Line 2 from Line 1.	3				00	
Ш	4. Select the appropriate filing status and enter the amount on Line 4: Married filing combined: \$32,000; Single, Head of	4				00	
CTION	Household and Qualifying Widower: \$25,000; Married Filing Separate: \$16,000				00		
Ĕ		5	V VOUDOELE	e epolice			
SEC	6. Enter <b>taxable</b> pension for each spouse from <b>private sources</b> from federal Form 1040A, Lines 11b and 12b, or federal Form	1 1	Y - YOURSELF	00	S - SPOUSE	100	
(0)	1040, Lines 15b and 16b.	6Y 7Y	00			00	
	7. Enter the amounts from Line 6Y and 6S or \$6,000, whichever is less		<u> </u>	7S		00	
	8. Add Lines 7Y and 7S	8				00	
	9. <b>Total private pension</b> , subtract Line 5 from Line 8. If Line 5 is greater than Line 8, enter \$0					00	
	SOCIAL SECURITY OR SOCIAL SECURITY DISABILITY CALCULATION — To be eligible for social seage by December 31 and have marked the 62 and older box on page 1 of Form MO-1040P. Age limit does not a						
	Enter your Missouri Adjusted Gross Income from Form MO-1040P, Line 4.	1				00	
	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	
N N	3. Subtract Line 2 from Line 1 and enter on Line 3. If Line 2 is greater than Line 1, enter \$0	3				00	
0			/ - YOURSELF	10	S - SPOUSE	00	
SECTION	4. Enter <b>taxable</b> social security benefits for each spouse from federal Form 1040A, Line 14b or federal Form 1040, Line 20b.	4Y		48		00	
SE	5. Enter <b>taxable</b> social security <b>disability</b> benefits for each spouse from federal Form 1040A, Line 14b or federal Form 1040, Line 20b	5Y	00			00	
	6. Multiply Line 4 or Line 5 by 50%.	6Y 7	; 00	6S		00	
	7. Add Lines 6Y and 6S.	8				00	
	8. Total social security/social security disability, subtract Line 3 from Line 7. If Line 3 is greater than Line 7, enter \$0 TOTAL PENSION AND SOCIAL SECURITY / SOCIAL SECURITY DISABILITY EXEMPTION	Ü				00	
	Total Pension Exemption and Social Security / Social Security Disability Exemption. Add Line 14 (Section A),		TOTAL				
	Line 9 (Section B), and Line 8 (Section C) and enter here and on Form MO-1040P, Line 10		EXEMPTION			00	

FORM MO-1040P PAGE 4

## **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 ..... 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 00 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								
Enter the amount of any net disaster loss included in your standard deduction and reported on Line 6 of federal Schedule L	3	00								
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								
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			If Line 15 is			If Line 15 is		If Line 15 is				If Line 1	5 is		If Line 15 is		
At least	But less than	Your tax is	At least	But less than	Your tax is	At least	But less than	Your tax is	At least	But less than	Your tax is	At least	But less than	Your tax 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
Гонов	alatanaa .	منامانامانم													9 000		315

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

over \$9,000 \$12,000, then the Missouri tax is \$315 + \$180 (6% of \$3,000) = \$495.

PLUS 6% of excess

NOTE: Make sure \$315 is included in your calculation of tax on taxable income over \$9,000.