



The MO-PTEV voucher is used if you have an amount due or you do not submit payment in full when you file your 2024 Pass-Through Entity Income Tax Return. Your Pass-Through Entity Income Tax Return and payment is due no later than the 15th day of the fourth month following the end of the income tax year.

- To submit payment by mail, complete the voucher in its entirety to ensure the payment is applied to the correct account and tax period.
The payment amount must be entered in whole dollars and match the amount of the check.
Attach a check or money order (U.S. funds only) payable to the Missouri Department of Revenue indicating the Missouri Identification Number or Federal Employer I.D. Number.
Do not postdate the payment.
Mail to: Missouri Department of Revenue, PO Box 3080, Jefferson City, MO 65105-3080.
By submitting a check, you authorize the Department of Revenue to process the check electronically upon receipt. The Department of Revenue may electronically resubmit checks returned for insufficient or uncollected funds.

If you have any questions concerning Missouri Pass-Through Entity Tax Payments, you may:

- E-mail: pteincome@dor.mo.gov
Visit dor.mo.gov/faq/taxation/business/entity-tax.html for more information about pass-through entity tax.
Telephone: (573) 751-4541
Write to the below address:
Missouri Department of Revenue
P.O. Box 3080
Jefferson City, MO 65105-3080

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 to 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]. In addition, information may be disclosed to the public regarding the name of a tax credit recipient and the amount issued to such recipient (Chapter 135, RSMo). (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.



Missouri Department of Revenue
2024 Pass-Through Entity Tax Payment Voucher
(Form MO-PTEV)



24124010001

Missouri Tax I.D. Number

[Input field for Missouri Tax I.D. Number]

Taxable Year Beginning (MM/DD/YY)

[Input fields for Taxable Year Beginning]

Federal Employer I.D. Number

[Input field for Federal Employer I.D. Number]

Due Date (MM/DD/YY)

[Input fields for Due Date]

Amount of Payment

(U.S. funds only) ..... \$ [Input field] . 00

Return this form with check or money order payable to the Missouri Department of Revenue P.O. Box 3080, Jefferson City, MO 65105-3080. If you pay by check, you authorize the Department to process the check electronically. Any returned check may be presented again electronically.

Department Use Only

Business Name
Address (Number and Street)
City, State, and ZIP Code

[Input fields for Department Use Only]