

MISSOURI DEPARTMENT OF REVENUE 2009 FORM MO-1040 INDIVIDUAL INCOME TAX RETURN—LONG FORM

FOR CALENDAR YEAR JAN. 1—DEC. 31, 2009, OR FISCAL YEAR BEGINNING 2009, ENDING 20

AMENDED RETURN — CHECK HERE SOFTWARE VENDOR CODE

NAME AND ADDRESS SOCIAL SECURITY NUMBER 400-00-6113 SPOUSE'S SOCIAL SECURITY NUMBER 400-00-6114

NAME (LAST) (FIRST) M.I. JR, SR Taylor Tim R DECEASED IN 2009 SPOUSE'S (LAST) (FIRST) M.I. JR, SR Taylor Susan M

IN CARE OF NAME (ATTORNEY, EXECUTOR, PERSONAL REPRESENTATIVE, ETC.) COUNTY OF RESIDENCE Livingston SCHOOL DISTRICT NO. 085

PRESENT ADDRESS (INCLUDE APARTMENT NUMBER OR RURAL ROUTE) 201 Binford Avenue CITY, TOWN, OR POST OFFICE Chillicothe STATE MO ZIP CODE 64601

You may contribute to any one or all of the trust funds on Line 45. See pages 9–10 for a description of each trust fund, as well as trust fund codes to enter on Line 45. Children's Veterans Elderly Home Delivered Meals Missouri National Guard Workers' Memorial LFD Childhood Lead Testing Missouri Military Family Relief General Revenue After School Retreat

PLEASE CHECK THE APPROPRIATE BOXES THAT APPLY TO YOURSELF OR YOUR SPOUSE AS OF DECEMBER 31, 2009.

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

Table with columns for Income (1-7) and rows for Yourself and Spouse. Includes sub-columns for 1Y, 2Y, 3Y, 4Y, 5Y, 6, 7Y, 7S.

Table with columns for Exemptions and Deductions (8-23) and rows for Yourself and Spouse. Includes sub-columns for 8, 9, 10, 11, 12, 13, 14, 15, 16, 17, 18, 19, 20, 21Y, 22Y, 23Y, 21S, 22S, 23S.

| | Yourself | | Spouse | |
|--|----------|-----------|--------|----------|
| | | | | |
| 24. Taxable income amount from Lines 23Y and 23S | 24Y | 22,026 00 | 24S | 5,166 00 |
| 25. Tax. (See tax table on page 38 of the instructions.) | 25Y | 1,097 00 | 25S | 131 00 |
| 26. Resident credit — Attach Form MO-CR and other states' income tax return(s). OR | 26Y | 784 00 | 26S | 0 00 |
| 27. Missouri income percentage — Enter 100% unless you are completing Form MO-NRI. Attach Form MO-NRI and a copy of your federal return if less than 100%. Check the box if you or your spouse is a professional entertainer or a member of a professional athletic team. <input type="checkbox"/> YOURSELF <input type="checkbox"/> SPOUSE | 27Y | 100 % | 27S | 100 % |
| 28. Balance — Subtract Line 26 from Line 25; OR Multiply Line 25 by percentage on Line 27. | 28Y | 313 00 | 28S | 131 00 |
| 29. Other taxes (Check box and attach federal form indicated.) <input type="checkbox"/> Lump sum distribution (Form 4972) <input type="checkbox"/> Recapture of low income housing credit (Form 8611) | 29Y | 0 00 | 29S | 0 00 |
| 30. Subtotal — Add Lines 28 and 29. | 30Y | 313 00 | 30S | 131 00 |
| 31. Total Tax — Add Lines 30Y and 30S. | 31 | | | 444 00 |

| | | |
|---|----|--------|
| 32. MISSOURI tax withheld — Attach Form W-2(s) and/or Form 1099(s). | 32 | 115 00 |
| 33. 2009 Missouri estimated tax payments (include overpayment from 2008 applied to 2009) | 33 | 0 00 |
| 34. Missouri tax payments for nonresident partners or S corporation shareholders — Attach Form MO-2NR. | 34 | 0 00 |
| 35. Missouri tax payments for nonresident entertainers — Attach Form MO-2ENT. | 35 | 0 00 |
| 36. Amount paid with Missouri extension of time to file (Form MO-60) | 36 | 0 00 |
| 37. Miscellaneous tax credits (from Form MO-TC, Line 13) — Attach Form MO-TC. | 37 | 0 00 |
| 38. Property tax credit — Attach Form MO-PTS. | 38 | 0 00 |
| 39. Total payments and credits — Add Lines 32 through 38. | 39 | 115 00 |

Skip Lines 40–42 if you are not filing an amended return.

| | | |
|--|----|----|
| 40. Amount paid on original return | 40 | 00 |
| 41. Overpayment as shown (or adjusted) on original return | 41 | 00 |
| INDICATE REASON(S) FOR AMENDING. | | |
| <input type="checkbox"/> A. Federal audit Enter date of IRS report. | | |
| <input type="checkbox"/> B. Net operating loss carryback Enter year of loss. | | |
| <input type="checkbox"/> C. Investment tax credit carryback Enter year of credit. | | |
| <input type="checkbox"/> D. Correction other than A, B, or C Enter date of federal amended return, if filed. | | |
| 42. Amended Return — total payments and credits. Add Line 40 to Line 39 or subtract Line 41 from Line 39. | 42 | 00 |

| | | |
|--|----|--------|
| 43. If Line 39, or if amended return, Line 42, is larger than Line 31, enter difference (amount of OVERPAYMENT) here. | 43 | 0 00 |
| 44. Amount of Line 43 to be applied to your 2010 estimated tax | 44 | 0 00 |
| 45. Enter the amount of your donation in the trust fund boxes to the right. See instructions for trust fund codes. | 45 | 00 |
| Children's Veterans Elderly Home Delivered Meals Missouri National Guard Workers Memorial LEAD Childhood Lead Testing Missouri Military Family Relief General Revenue After School Retreat Addl. Trust Fund Code (See Instr.) Addl. Trust Fund Code (See Instr.) | | 00 |
| 46. Overpayment to be refunded to you. Subtract Lines 44 and 45 from Line 43 and enter here. Sign below and mail return to: Department of Revenue, PO BOX 3222, JEFFERSON CITY, MO 65105-3222 | 46 | 0 00 |
| 47. If Line 31 is larger than Line 39 or Line 42, enter the difference (amount of UNDERPAYMENT) here. | 47 | 329 00 |
| 48. Underpayment of estimated tax penalty — Attach Form MO-2210. Enter penalty amount here. | 48 | 0 00 |
| 49. Total amount due — Add Lines 47 and 48 and enter here. Sign below and mail return and payment to: Department of Revenue, PO BOX 3370, JEFFERSON CITY, MO 65105-3370. Please write your social security number(s) and daytime phone number on your check or money order (U.S. funds only). Make payable to Missouri Department of Revenue. | 49 | 329 00 |

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.

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. <input type="checkbox"/> YES <input type="checkbox"/> NO | | E-MAIL ADDRESS | PREPARER'S TELEPHONE |
| SIGNATURE | DATE | PREPARER'S SIGNATURE | FEIN, SSN, OR PTIN |
| SPOUSE'S SIGNATURE (If filing combined, BOTH must sign) | DAYTIME TELEPHONE | PREPARER'S ADDRESS AND ZIP CODE | DATE |



MISSOURI DEPARTMENT OF REVENUE
INDIVIDUAL INCOME TAX
ADJUSTMENTS

2009
FORM
MO-A

Attachment Sequence No. 1040-01

ATTACH TO FORM MO-1040.
ATTACH YOUR FEDERAL RETURN. See information
beginning on page 11 to assist you in completing this form.

Table with 4 columns: LAST NAME, FIRST NAME, INITIAL, SOCIAL SECURITY NO. for Taylor and Spouse's LAST NAME, FIRST NAME, INITIAL, SPOUSE'S SOCIAL SECURITY NO. for Taylor.

PART 1 — MISSOURI MODIFICATIONS TO FEDERAL ADJUSTED GROSS INCOME (SEE PAGE 11).

Table for ADDITIONS with columns Y-YOURSELF and S-SPOUSE. Rows 1-6 including Interest on state and local obligations, Partnership/Fiduciary/S corporation/Net Operating Loss, Nonqualified distribution, Food Pantry contributions, Nonresident Property Tax, and TOTAL ADDITIONS.

Table for SUBTRACTIONS with columns Y-YOURSELF and S-SPOUSE. Rows 7-14 including Interest from exempt federal obligations, State income tax refund, Partnership/Fiduciary/S corporation/Railroad retirement benefits/Net Operating Loss/Military/Build America and Recovery Zone Bond Interest/Combat pay/MO Public-Private Transportation Act/Other, Exempt contributions, Qualified Health Insurance Premiums, Missouri depreciation adjustment, Home Energy Audit Expenses, and TOTAL SUBTRACTIONS.

PART 2 — MISSOURI ITEMIZED DEDUCTIONS — Complete this section only if you itemize deductions on your federal return. Attach a copy of your federal Form 1040 (pages 1 and 2) and federal Schedule A.

Table for MISSOURI ITEMIZED DEDUCTIONS with columns 1-11. Rows 1-11 including Total federal itemized deductions, 2008 FICA (youself and spouse), 2008 Railroad retirement tax, 2008 Self-employment tax, State and local income taxes, Earnings taxes, Net state income taxes, and MISSOURI ITEMIZED DEDUCTIONS.

NOTE: IF LINE 11 IS LESS THAN YOUR FEDERAL STANDARD DEDUCTION, SEE INFORMATION ON PAGE 7.

Table for WORKSHEET FOR PART 2 — STATE AND LOCAL INCOME TAXES, LINE 10. Rows 1-8 including instructions for calculating state and local income taxes.

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).

PART 3

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

| | | | | | |
|---|-----|---------------------|----|-------------------|------|
| 1. Enter your Missouri Adjusted Gross Income from Form MO-1040, Line 6 | 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 | | | 0 | 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 | | | 0 | 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 | 0 00 |
| 7. Multiply Line 6 by 50% | 7Y | 0 | 00 | 7S | 0 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 | 0 | 00 | 8S | 0 00 |
| 9. Enter the amount from Line 6 or \$6,000, whichever is less | 9Y | 0 | 00 | 9S | 0 00 |
| 10. Enter the amount from Line 8 or Line 9, whichever is greater | 10Y | 0 | 00 | 10S | 0 00 |
| 11. If you received taxable social security and are claiming a social security exemption, complete Lines 1 through 8 of the 3rd section of Part 3 of the MO-A (social security or social security disability exemption) and enter the amount(s) from Line(s) 6y and 6s here | 11Y | | 00 | 11S | 0 00 |
| 12. Subtract Line 11 from Line 10. If line 11 is greater than Line 10, enter \$0 | 12Y | | 00 | 12S | 0 00 |
| 13. Add amounts on Lines 12y and 12s | 13 | | | | 0 00 |
| 14. Total Public Pension, subtract Line 5, from Line 13. If Line 5 is greater than Line 13, enter \$0 | 14 | | | | 0 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.

| | | | | | |
|--|----|---------------------|----|-------------------|------|
| 1. Enter your Missouri Adjusted Gross Income from Form MO-1040, Line 6 | 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 | | | 0 | 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 | | | 0 | 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 | 0 00 |
| 7. Enter the amounts from Line 6Y and 6S or \$6,000, whichever is less | 7Y | | 00 | 7S | 0 00 |
| 8. Add Lines 7Y and 7S | 8 | | | | 0 00 |
| 9. Total private pension , subtract Line 5 from Line 8. If Line 5 is greater than Line 8, enter \$0 | 9 | | | | 0 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-1040. Age limit does not apply to social security disability deduction.

| | | | | | |
|--|----|---------------------|----|-------------------|-----------|
| 1. Enter your Missouri Adjusted Gross Income from Form MO-1040, Line 6 | 1 | | | | 96,042 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 | | | | 100000 00 |
| 3. Subtract Line 2 from Line 1 and enter on Line 3. If Line 2 is greater than Line 1, enter \$0 | 3 | | | | 0 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 | 0 00 |
| 5. Enter taxable social security disability benefits for each spouse from federal Form 1040A, Line 14b or federal Form 1040, Line 20b | 5Y | 0 | 00 | 5S | 18,173 00 |
| 6. Multiply Line 4 or Line 5 by 50%. | 6Y | | 00 | 6S | 9,087 00 |
| 7. Add Lines 6Y and 6S | 7 | | | | 9,087 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 | | | | 9,087 00 |

TOTAL PENSION AND SOCIAL SECURITY / SOCIAL SECURITY DISABILITY EXEMPTION

| | | | | | |
|--|------------------------|--|--|--|----------|
| Total Pension Exemption and Social Security / Social Security Disability Exemption. Add Line 14 (Public Pension Calculation), Line 9 (Private Pension Calculation), and Line 8 (Social Security Calculation) and enter here and on Form MO-1040, Line 8. | TOTAL EXEMPTION | | | | 9,087 00 |
|--|------------------------|--|--|--|----------|



MISSOURI DEPARTMENT OF REVENUE
**CREDIT FOR INCOME TAXES PAID TO
 OTHER STATES OR POLITICAL SUBDIVISIONS**

2009
 FORM
MO-CR

Attachment Sequence No. 1040-03

1040 2D Test 3

Complete this form for you and your spouse, if you and/or your spouse have income from another state or political subdivision. If you had multiple credits, complete a separate form for each state or political subdivision.

- Attach a copy of all income tax returns for each state or political subdivision.
- Attach Form MO-CR to Form MO-1040.

| | | | |
|---|---|--------------------------------------|---|
| YOUR NAME Tim R Taylor | YOUR SOCIAL SECURITY NO. 4 0 0 0 0 6 1 1 3 | YOUR SPOUSE'S NAME Susan M Taylor | SPOUSE'S SOCIAL SECURITY NO. 4 0 0 0 0 6 1 1 4 |
| 1. Claimant's total adjusted gross income (Form MO-1040, Line 5Y and/or Line 5S) | | YOURSELF 77869:00 | SPOUSE 0:00 |
| 2. Claimant's Missouri income tax (Form MO-1040, Line 25Y and/or Line 25S) | | 1097:00 | 00 |
| USE TWO LETTER ABBREVIATION FOR STATE OR NAME OF POLITICAL SUBDIVISION. See table on back. | | STATE OF: CA | STATE OF: |
| 3. Wages and commissions | | 34825:00 | 0:00 |
| 4. Other (describe nature) | | 00 | 00 |
| 5. Total — Add Lines 3 and 4. | | 34825:00 | 0:00 |
| 6. Less: related adjustments (from Federal Form 1040A, Line 20, OR Federal Form 1040, Line 36) .. | | 00 | 00 |
| 7. Net amounts — Subtract Line 6 from Line 5. | | 34825:00 | 0:00 |
| 8. Percentage of your income taxed — Divide Line 7 by Line 1. | | 45% % | 0% % |
| 9. Maximum credit — Multiply Line 2 by percentage on Line 8. | | 494:00 | 00 |
| 10. Income tax you paid to another state or political subdivision. This is not tax withheld. The income tax is reduced by all credits, except withholding and estimated tax. | | 434:00 | 00 |
| 11. Credit — Enter the smaller amount of Line 9 or Line 10 here and on Form MO-1040, Line 26Y or Line 26S. (If you have multiple credits, add the amounts on Line 11 from each Form MO-CR before entering on Form MO-1040 | | 434:00 | 0:00 |

MO 860-1095 (11-2009)

For Privacy Notice see the instructions



MISSOURI DEPARTMENT OF REVENUE
**CREDIT FOR INCOME TAXES PAID TO
 OTHER STATES OR POLITICAL SUBDIVISIONS**

2009
 FORM
MO-CR

Attachment Sequence No. 1040-03

Complete this form for you and your spouse, if you and/or your spouse have income from another state or political subdivision. If you had multiple credits, complete a separate form for each state or political subdivision.

- Attach a copy of all income tax returns for each state or political subdivision.
- Attach Form MO-CR to Form MO-1040.

| | | | |
|---|---|--------------------------------------|---|
| YOUR NAME Tim R Taylor | YOUR SOCIAL SECURITY NO. 4 0 0 0 0 6 1 1 3 | YOUR SPOUSE'S NAME Susan M Taylor | SPOUSE'S SOCIAL SECURITY NO. 400006114 |
| 1. Claimant's total adjusted gross income (Form MO-1040, Line 5Y and/or Line 5S) | | YOURSELF 77869:00 | SPOUSE 0:00 |
| 2. Claimant's Missouri income tax (Form MO-1040, Line 25Y and/or Line 25S) | | 1097:00 | 00 |
| USE TWO LETTER ABBREVIATION FOR STATE OR NAME OF POLITICAL SUBDIVISION. See table on back. | | STATE OF: KS | STATE OF: |
| 3. Wages and commissions | | 29414:00 | 0:00 |
| 4. Other (describe nature) | | 00 | 00 |
| 5. Total — Add Lines 3 and 4. | | 29414:00 | 0:00 |
| 6. Less: related adjustments (from Federal Form 1040A, Line 20, OR Federal Form 1040, Line 36) .. | | 00 | 00 |
| 7. Net amounts — Subtract Line 6 from Line 5. | | 29414:00 | 0:00 |
| 8. Percentage of your income taxed — Divide Line 7 by Line 1. | | 38% % | 0% % |
| 9. Maximum credit — Multiply Line 2 by percentage on Line 8. | | 417:00 | 0:00 |
| 10. Income tax you paid to another state or political subdivision. This is not tax withheld. The income tax is reduced by all credits, except withholding and estimated tax. | | 350:00 | 00 |
| 11. Credit — Enter the smaller amount of Line 9 or Line 10 here and on Form MO-1040, Line 26Y or Line 26S. (If you have multiple credits, add the amounts on Line 11 from each Form MO-CR before entering on Form MO-1040 | | 350:00 | 0:00 |

MO 860-1095 (11-2009)

For Privacy Notice see the instructions