



Department Use Only (MM/DD/YY)

Three empty boxes for Department Use Only.

Social Security Number

Three yellowed-out boxes for Social Security Number.

Taxpayer Name

Yellowed-out box for Taxpayer Name.

Address

City

State

ZIP Code

Four empty boxes for Address, City, State, and ZIP Code.

E-mail Address

Empty box for E-mail Address.

Affidavit

I have been unable to obtain a Form W-2 from my employer, named below, and have so notified the Missouri Department of Revenue, Taxation Division. The amounts shown below are my best estimates of the gross wages paid to me and the federal income tax withheld, Missouri state income tax withheld and F.I.C.A. employee tax withheld by this employer during the following tax year.

Tax Year

Input boxes for Tax Year: 2, 0, ., .

Employer

Business Name

Owner Name

Two empty boxes for Business Name and Owner Name.

Address

City

State

ZIP Code

Four empty boxes for Address, City, State, and ZIP Code.

Gross Wages

Federal Tax Withheld

Missouri State Tax Withheld

F.I.C.A. Employee Tax Withheld

Four pairs of input boxes for wages and taxes, each ending in .00.

Reason

Please indicate the reason Form W-2 was not obtained from this employer. Provide an explanation of how you arrived at the estimated figures and attach copies of check stubs or other documentation pertinent to this calculation.

Large empty box for Reason.

Signature

Under penalties of perjury, I declare that the above information and any attached supplement is true, complete, and correct.

Signature of Employee

Printed Name

Date Signed (MM/DD/YYYY)

Four empty boxes for Signature, Printed Name, and Date Signed.

Attach your completed Form 548 to your Missouri Income Tax Return.

