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490-54-9999

Yourself (Y)

Spouse (S)

Income

1. Federal adjusted gross income from federal return (see instructions and worksheet on pages 6 and 7)	1Y	51,830	00	1S		00
2. Total additions (from Form MO-A , Part 1, Line 7)	2Y		00	2S		00
3. Total income - Add Lines 1 and 2	3Y	51,830	00	3S		00
4. Total subtractions (from Form MO-A, Part 1, Line 19)	4Y		00	4S		00
5. Missouri adjusted gross income - Subtract Line 4 from Line 3	5Y	51,830	00	5S		00
6. Total Missouri adjusted gross income - Add columns 5Y and 5S	6	51,830	00			
7. Income percentages - Divide columns 5Y and 5S by total on Line 6. (Must equal 100%)	7Y	100	%	7S	0	%

8. Pension, Social Security and Social Security Disability exemption (from Form MO-A, Part 3, Section D)	8		00
9. Tax from federal return	9		00
10. Other tax from federal return	10		00
11. Total tax from federal return. Do not enter federal income tax withheld	11	0	00
12. Federal tax percentage - Enter the percentage based on your Missouri Adjusted Gross Income, Line 6. Use the chart below to find your percentage	12	15	%

Missouri Adjusted Gross Income Range, Line 6:	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%



Exemptions and Deductions

13. Federal income tax deduction - Multiply Line 11 by the percentage on Line 12. Enter this amount not to exceed \$5,000 for an individual or \$10,000 for combined filers	13		00
14. Missouri standard deduction or itemized deductions. (If itemizing, See Form MO-A, Part 2) • Single or Married Filing Separate - \$15,750 • Head of Household - \$23,625 • Married Filing Combined or Qualifying Widow(er) - \$31,500	14	23,625	00
15. Additional Exemption for Head of Household and Qualifying Widow(er)	15	1,400	00
16. Long-term care insurance deduction	16		00
17. Health care sharing ministry deduction	17		00
18. Active Duty Military income deduction	18		00
19. Inactive Duty Military income deduction	19		00
20. Reserved	20		00
21. Farmland sold, rented, leased, or crop-shared to a beginning farmer deduction. Enter the sum of Lines 21A, 21B, and 21C on Line 21	21		00

21A. Sold	\$	00	21B. Rented/ Leased	\$	00	21C. Crop- Shared	\$	00
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Deductions Continued

22. Reserved	A.	<input type="text"/>	B.	<input type="text"/>	22	<input type="text"/>	.00
23. Reserved					23	<input type="text"/>	.00
24. Foster parent tax deduction					24	<input type="text"/>	.00
25. Total deductions - Add Lines 8 and 13 through 24					25	25,025	.00
26. Subtotal - Subtract Line 25 from Line 6					26	26,805	.00
27. Multiply Line 26 by appropriate percentages (%) on Lines 7Y and 7S					27Y	26,805	.00
					27S	<input type="text"/>	.00
28. Enterprise zone or rural empowerment zone income modification					28Y	<input type="text"/>	.00
					28S	<input type="text"/>	.00

Tax

29. Taxable income - Subtract Line 28 from Line 27					29Y	26,805	.00
					29S	<input type="text"/>	.00
30. Tax (see tax chart on page 21 of the instructions)					30Y	1,084	.00
					30S	<input type="text"/>	.00
31. Resident credit - Attach Form MO-CR and other states' income tax return(s)					31Y	<input type="text"/>	.00
					31S	<input type="text"/>	.00
32. Missouri income percentage - Enter 100% if not completing Form MO-NRI . Attach Form MO-NRI and federal return if applicable					32Y	100.000	%
					32S	100.000	%
33. Balance - Subtract Line 31 from Line 30; OR multiply Line 30 by percentage on Line 32					33Y	1,084	.00
					33S	<input type="text"/>	.00
34. Other taxes - Select 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)					34Y	<input type="text"/>	.00
					34S	<input type="text"/>	.00
35. Subtotal - Add Lines 33 and 34					35Y	1,084	.00
					35S	<input type="text"/>	.00
36. Total Tax - Add Lines 35Y and 35S					36	1,084	.00



Payments and Credits

37. MISSOURI tax withheld - Attach Forms W-2 and 1099					37	<input type="text"/>	.00
38. 2025 Missouri estimated tax payments - Include overpayment from 2024 applied to 2025					38	<input type="text"/>	.00
39. Missouri tax payments for nonresident partners or S corporation shareholders - Attach Forms MO-2NR and MO-NRP					39	<input type="text"/>	.00
40. Missouri tax payments for nonresident entertainers - Attach Form MO-2ENT					40	<input type="text"/>	.00
41. Amount paid with Missouri extension of time to file (Form MO-60)					41	<input type="text"/>	.00
42. Miscellaneous tax credits (from Form MO-TC , Line 13) - Attach Form MO-TC					42	<input type="text"/>	.00
43. Property tax credit - Attach Form MO-PTS					43	<input type="text"/>	.00
44. Missouri Working Family Tax Credit (Attach Form MO-WFTC and federal return)					44	<input type="text"/>	.00
45. Total payments and credits - Add Lines 37 through 44					45	0	.00

Skip Lines 46 through 48 if you are not filing an amended return.

Amended Return

- 46. Amount paid on original return 46 .00
- 47. Overpayment as shown (or adjusted) on original return 47 .00

Indicate Reason for Amending

- A. Federal audit Enter date of IRS report (MM/DD/YY)
- B. Net Operating Loss carryback Enter year of loss (YY)
- C. Investment tax credit carryback Enter year of credit (YY)
- D. Correction other than A, B, or C Enter date of federal amended return, if filed. (MM/DD/YY)

- 48. Amended return total payments and credits - Add Lines 45 and 46; subtract from Line 47. Enter on Line 48 48 .00

Refund

- 49. If Line 45, or if amended return, Line 48, is larger than Line 36, enter the difference. Amount of OVERPAYMENT 49 .00

- 50. Amount of Line 49 to be applied to your 2026 estimated tax 50 .00

51. Enter the amount of your donation in the trust fund boxes below. See instructions for additional trust fund codes.

- 51a. Children's Trust Fund .00
- 51b. Veterans Trust Fund .00
- 51c. Elderly Home Delivered Meals Trust Fund .00
- 51d. Missouri National Guard Trust Fund .00
- 51e. Workers' Memorial Fund .00
- 51f. Childhood Lead Testing Fund .00
- 51g. Missouri Military Family Relief Fund .00
- 51h. General Revenue Fund .00
- 51i. Organ Donor Program Fund .00
- 51j. Kansas City Regional Law Enforcement Memorial Foundation Fund .00
- 51k. Soldiers Memorial Military Museum in St. Louis Fund .00
- 51l. Missouri Medal of Honor Fund .00
- 51m. Additional Fund Code Additional Fund Amount .00
- 51n. Additional Fund Code Additional Fund Amount .00

- Total Donation - Add amounts from Boxes 51a through 51n and enter here 51 .00

- 52. Amount of Line 49 to be deposited into a Missouri 529 Education Plan (MOST) account. Enter the total deposit amount from **Form 5632** 52 .00

- 53. **REFUND** - Subtract Lines 50, 51, and 52 from Line 49 and enter here 53 .00

- a. Routing Number
- b. Account Number
- c. Checking Savings



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Amount Due

54. If Line 36 is larger than Line 45 or Line 48, enter the difference. Amount of UNDERPAYMENT 54

55. Underpayment of estimated tax penalty - Attach **Form MO-2210** . Enter penalty amount here . . . 55

Select this box if you are a farmer exempt from the underpayment of estimated tax penalty.

56. **AMOUNT DUE** - Add Lines 54 and 55.
If you pay by check, you authorize the Department of Revenue to process the check electronically. Any returned check may be presented again electronically 56

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. I am aware of any applicable reporting requirements of **Section 135.805, RSMo** , and the penalty provisions of **Section 135.810, RSMo** .

Signature

Signature Date (MM/DD/YY)

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

E-mail Address Daytime Telephone

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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Department Use Only

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Mail to: Balance Due:
Missouri Department of Revenue
P.O. Box 329
Jefferson City, MO 65105-0329
Phone: (573) 751-7200

Refund or No Amount Due:
Missouri Department of Revenue
P.O. Box 500
Jefferson City, MO 65105-0500
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

Form MO-1040 (Revised 12-2025)

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/MoVeteransInformationSurvey/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.