Employee's Withholding Certificate

This certificate is for income tax withholding and child support enforcement purposes only. Type or print.

| Full Name Soc | | | | | | ecurity Number | | | | | |
|--|--|---|--|--------|---|----------------|-------|-----|----|--|--|
| | | | | | 1 | I I | 1 | 1 1 | I. | | |
| Ī | lome Ad | ne Address (Number and Street or Rural Route) City or Town State | | | | | ZIP C | ode | | | |
| | | | | | | | | | | | |
| | 1. Filing | Filing Status: Check the appropriate filling status below. | | | | | | | | | |
| | Single or Married Spouse Works or Married Filing Separate Married (Spouse does not work) Head of Household | | | | | | | | | | |
| 2. Additional withholding: If you expect to have a balance due (as a result of interest income, dividends, income from a | | | | | | | | | | | |
| | • | rom ea | | | | | | | | | |
| | | period. To calculate the amount needed, divide the amount of . Enter the additional amount to be withheld each pay period c | | | | | | | | | |
| | | uced withholding: If you expect to receive a refund (as a result | | | |) | | | | | |
| | | our tax return, you may direct your employer to only withhold t not use the standard calculations for withholding. If you design | | | | | | | | | |
| | being under withheld. To calculate the amount needed, divide the amount of your expected tax by the number of pay | | | | | | | | | | |
| | | periods in a year. Enter the amount to be withheld instead of the standard calculation. If no amount is indicated on line 3, the standard calculations will be used | | | | | | | | | |
| | 4. Exer | exempt Status: Select the appropriate reason you are claiming an exemption from withholding below and indicate | | | | | | | | | |
| | EXE | XEMPT on line 4 | | | | | | | | | |
| | | I am exempt because I had a right to a refund of all Missouri income tax withheld last year and expect to have no tax liability this year. A new MO W-4 must be completed annually if you wish to continue the exemption. | | | | | | | | | |
| | | | | | | | | | | | |
| | | Military Spouses Residency Relief Act and have no Missouri tax liability. | | | | | | | | | |
| | | I am exempt because my income is earned as a member of any ac United States and I am eligible for the military income deduction. | ctive duty component of the Armed Forces | of the | | | | | | | |
| | | | | | | | | | | | |

Under penalties of perjury, I certify that the information provided on this form is true and accurate.

| Sign | Employee's Signature (Form is not valid unless you sign it) | | | | | | | Da | Date (MM/DD/YYYY) | | | | | |
|---------|--|-------------------|------------------------------|--|--|--|----------|------------------------------------|-------------------|--|--|--|--|--|
| 'er | Employer's Name | Employer's Addres | S | | | | | | | | | | | |
| Employe | City | State | | | | | ZIP Code | | | | | | | |
| ш | Date Services for Pay First Performed by Employee (MM/DD/YY) | (Y) | Federal Employer I.D. Number | | | | | Missouri Tax Identification Number | | | | | | |

Notice to Employer:

Form

MO W-4

Within 20 days of hiring a new employee, a copy of the Employee's Withholding Certificate (Form MO W-4) must be submitted by one of the following methods:

• Email: withholding@dor.mo.gov

• Fax: 877-573-6172

- Mail to: Missouri Department of Revenue
- P.O. BOX 3340

Jefferson City, MO 65105-3340

Please visit dss.mo.gov/child-support/employers/new-hire-reporting.htm for additional information regarding new hire reporting.

Notice to Employee:

Return completed form to your Employer. Consider completing a new Form MO W-4 each year and when your personal or financial situation changes. Visit our online withholding calculator <u>mytax.mo.gov/rptp/portal/home/withholding-calculator</u>.

Items to Remember:

- Employees must complete a new form if their filing status changes or to adjust the amount of withholding.
- If you are claiming an "Exempt" status due to the Military Spouses Residency Relief Act you must provide one of the following to your employer: Leave and Earnings
 Statement of the non-resident military servicemember, Form W-2 issued to the nonresident military servicemember, a military identification card, or specific military
 orders received by the servicemember. You must also provide verification of residency such as a copy of your state income tax return filed in your state of residence,
 a property tax receipt from the state of residence, a current drivers license, vehicle registration or voter ID card. For additional assistance in regard to Military, visit the
 department's website dor.mo.gov/military/.
- Additional information can be found at <u>mo.gov/business/withhold/</u>.

| Mail to: | Taxation Division P.O. Box 3340 | Ever served on active duty in the United States Armed Forces? | | | | | |
|----------|------------------------------------|--|--------|--|--|--|--|
| | Jefferson City, MO 65105-3340 | If yes, visit dor.mo.gov/military/ to see the services and benefits we offer to all eligible | | | | | |
| Phone: | (573) 522-0967 | military individuals. A list of all state agency resources and benefits can be for | und at | | | | |
| Fax: | 877-573-6172 | veteranbenefits.mo.gov/state-benefits/. | | | | | |