Employee's Withholding Certificate

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

Full Name Social S						al Security Number					
					1	I I	1	1 1	I.		
I	lome Ad	me Address (Number and Street or Rural Route) City or Town State					ZIP C	ode			
	1. Filing										
	 Single or Married Spouse Works or Married Filing Separate 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									
		pay period. To calculate the amount needed, divide the amount of the expected tax by the number of pay periods in a year. Enter the additional amount to be withheld each pay period on line 2									
	R Podu	uced withholding: If you expect to receive a refund (as a result	of itemized deductions, modifications	or tav	credite						
	on yo	our tax return, you may direct your employer to only withhold t	he amount indicated on line 3. Your e	mploy	er	,					
		not use the standard calculations for withholding. If you design g under withheld. To calculate the amount needed, divide the									
	perio	periods in a year. Enter the amount to be withheld instead of the standard calculation. If no amount is indicated on									
	line 3	line 3, the standard calculations will be used									
		Exempt Status: Select the appropriate reason you are claiming an exemption from withholding below and indicate EXEMPT 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.									
		I am exempt because I meet the conditions set forth under the Ser Military Spouses Residency Relief Act and have no Missouri tax lia		by the							
		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)				
mployer	Employer's Name	Employer's Address											
	City	State				ZIP Code							
	Date Services for Pay First Performed by Employee (MM/DD/YYYY) / / /			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: (573) 526-8079

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 fou	und at				
Fax:	(573) 526-8079	veteranbenefits.mo.gov/state-benefits/					