

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

Full Name				Social S	Social Security Number					
Home Address (Number and Street or Rural Route)		City or	City or Town		State			ZIP Code		
1. F	Filing Status: Check the appropriate filling status below. Single or Married Spouse Works or Married Filing Separat Head of Household	е 🗍 М	arried (Spouse	e does not work)						
p	Additional withholding: If you expect to have a balance due (as part-time job, etc.) on your tax return, you may request your expay period. To calculate the amount needed, divide the amount rear. Enter the additional amount to be withheld each pay per	mployer to v	withhold an a pected tax by	dditional amount the number of pa	of tax fro ay period	m each s in a	2			
v b	Reduced withholding: If you expect to receive a refund (as a rom your tax return, you may direct your employer to only withhold not use the standard calculations for withholding. If you depeing under withheld. To calculate the amount needed, divide periods in a year. Enter the amount to be withheld instead of the 3, the standard calculations will be used	nold the amo esignate an a the amount the standard	ount indicate amount that it of your expend calculation.	d on line 3. Your s too low, it could ected tax by the n lf no amount is in	employer d result in number of ndicated of	you pay	3			
	Exempt Status: Select the appropriate reason you are claiming EXEMPT on line 4				nd indicat	e 	4			
	I am exempt because I had a right to a refund of all Missouri i this year. A new MO W-4 must be completed annually if you v				ive no tax	liability				
	I am exempt because I meet the conditions set forth under the Servicemember Civil Relief Act, as amended by the Military Spouses Residency Relief Act and have no Missouri tax liability.									
	I am exempt because my income is earned as a member of a United States and I am eligible for the military income deducti	,	y component o	of the Armed Force	s of the					
Unde	r penalties of perjury, I certify that the information provided on thi	is form is true	e and accurat	е.			-			
Empl	oyee's Signature (Form is not valid unless you sign it)					Date (MM/DD/YYYY)				
Empl	Employer's Name Employer's Address									
City	State	State ZIP Code								
Date	Services for Pay First Performed by Employee (MM/DD/YYYY)		Federal Empl	oyer I.D. Number		Missour	i Tax I	Identificati	on Numb	er I
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Notice to Employer:

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 <u>dss.mo.gov/child-support/employers/new-hire-reporting.htm</u> 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 mytax.mo.gov/rptp/portal/home/withholding-calculator.

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 mo.gov/business/withhold/.

Mail to: Taxation Division

P.O. Box 3340

Jefferson City, MO 65105-3340

Phone: (573) 522-0967 **Fax:** (573) 526-8079

Ever served on active duty in the United States Armed Forces?

If yes, visit <u>dor.mo.gov/military/</u> to see the services and benefits we offer to all eligible military individuals. A list of all state agency resources and benefits can be found at <u>veteranbenefits.mo.gov/state-benefits/</u>.

Form MO W-4 (Revised 08-2021)