

**MISSOURI INDIVIDUAL INCOME TAX RETURN
SINGLE/MARRIED (INCOME FROM ONE SPOUSE)—SHORT FORM 2016 FORM MO-1040A**

LAST NAME Custer		FIRST NAME David		MIDDLE INITIAL Er	DECEASED 2016	SOCIAL SECURITY NUMBER	SOFTWARE VENDOR CODE (Assigned by DOR)
SPOUSE'S LAST NAME		FIRST NAME		MIDDLE INITIAL	DECEASED 2016	SPOUSE'S SOCIAL SECURITY NUMBER	000
IN CARE OF NAME (ATTORNEY, EXECUTOR, PERSONAL REPRESENTATIVE, ETC.)							COUNTY OF RESIDENCE
PRESENT ADDRESS (INCLUDE APARTMENT NO. OR RURAL ROUTE)				CITY, TOWN, OR POST OFFICE, STATE, AND ZIP CODE			
PLEASE CHECK THE APPROPRIATE BOXES THAT APPLY TO YOURSELF OR YOUR SPOUSE.		AGE 65 OR OLDER <input type="checkbox"/> YOURSELF <input type="checkbox"/> SPOUSE	BLIND <input type="checkbox"/> YOURSELF <input type="checkbox"/> SPOUSE	100% DISABLED <input type="checkbox"/> YOURSELF <input type="checkbox"/> SPOUSE	NON-OBLIGATED SPOUSE <input type="checkbox"/> YOURSELF <input type="checkbox"/> SPOUSE		
1. Federal adjusted gross income from your 2016 federal return. (See page 6 of the instructions.)							1 6,700 00
2. Any state income tax refund included in your 2016 federal adjusted gross income							2 - 00
3. Total Missouri adjusted gross income — Subtract Line 2 from Line 1.							3 = 6,700 00
4. Mark your filing status box below and enter the appropriate exemption amount on Line 4. <input type="checkbox"/> A. Single — \$2,100 (See Box B before checking.) <input type="checkbox"/> B. Claimed as a dependent on another person's federal tax return — \$0.00 <input type="checkbox"/> C. Married filing joint federal & combined Missouri — \$4,200 Check which spouse had income: <input type="checkbox"/> Yourself <input type="checkbox"/> Spouse <input checked="" type="checkbox"/> D. Married filing separate — \$2,100 <input type="checkbox"/> E. Married filing separate (spouse NOT filing) — \$4,200 <input type="checkbox"/> F. Head of household — \$3,500 <input type="checkbox"/> G. Qualifying widow(er) with dependent child — \$3,500							4 2,100 00
5. Tax from federal return (Do not enter federal income tax withheld.) — <input type="checkbox"/> 00 Enter this amount on Line 5 or \$5,000, whichever is less. If married filing combined, enter this amount on Line 5 or \$10,000, whichever is less.							5 + 00
6. Missouri standard deduction or itemized deductions. Single or Married Filing Separate — \$6,300 ; Head of Household — \$9,300 ; Married Filing a Combined Return or Qualifying Widow(er) — \$12,600 . If you are age 65 or older, blind, or claimed as a dependent, see your federal return or page 7. If you are itemizing, see back of form.							6 + 12,600 00
7. Number of dependents you claimed on your Federal Form 1040 or 1040A, Line 6c <input type="checkbox"/> Check box if claiming a stillborn child; see instructions on Page 7 <input type="checkbox"/> x \$1,200 =							7 + 00
8. Long-term care insurance deduction							8 + 00
9. Total Deductions — Add Lines 4 through 8.							9 = 8,400 00
10. Missouri Taxable Income — Subtract Line 9 from Line 3.							10 6,700 00
11. Tax — Use the tax chart on the back of this form to figure the tax.							11 651 00
12. Missouri tax withheld from your Forms W-2 and Forms 1099. Attach copies of Forms W-2 and Forms 1099.							12 651 00
13. Any Missouri estimated tax payments made for 2016 (include overpayment from 2015 applied to 2016).							13 00
14. Total Payments — Add Lines 12 and 13.							14 651 00
15. If Line 14 (Total Payments) is more than Line 11 (Total Tax), enter the difference (amount of overpayment) here. (If Line 14 is less than Line 11, skip to Line 20.)							15 651 00
16. Amount from Line 15 that you want applied to your 2017 estimated tax.							16 00
17. Enter the amount of your donation in the trust fund boxes to the right. See the instructions for fund codes. 17.							00 00 00 00 00 00 00 00 00 00
18. Amount from Line 15 to be deposited into a Missouri 529 College Savings Plan (MOST) account. Enter amount from Line E of Form 5632							18 00
19. REFUND - Subtract Lines 16, 17, and 18 from Line 15 and enter here. This is your refund. Sign below and mail to: Department of Revenue, P.O. Box 500, Jefferson City, MO 65106-0500.							19 651 00
20. AMOUNT DUE - If Line 14 is less than Line 11, enter the difference here. You have an amount due. Sign below and mail to: Department of Revenue, P.O. Box 329, Jefferson City, MO 65107-0329. See instructions for Line 20.							20 00
If you pay by check, you authorize the Department of Revenue to process the check electronically. Any check returned unpaid may be presented again electronically.							
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. Declaration of preparer (other than taxpayer) is based on all information of which he or she has any 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 authorize the Director of Revenue or delegate to discuss my return and attachments with the preparer or any member of the preparer's firm. <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO					E-MAIL ADDRESS NA		PREPARER'S PHONE () - - - -
SIGNATURE David Custer		DATE (MMDDYYYY) 11/15/2017		PREPARER'S SIGNATURE NA		FEIN, SSN OR PTIN NA	
SPOUSE'S SIGNATURE (if filing combined, BOTH must sign)		DAYTIME TELEPHONE		PREPARER'S ADDRESS AND ZIP CODE NA		DATE (MMDDYYYY) - - - -	

Substitute for Form W-2, Wage and Tax Statement, or Form 1099-R, Distributions From Pensions, Annuities, Retirement or Profit-Sharing Plans, IRAs, Insurance Contracts, etc.

OMB No. 1545-0074

▶ Attach to Form 1040, 1040A, 1040-EZ, or 1040X.

▶ Information about Form 4852 is available at www.irs.gov/form4852.

1 Name(s) shown on return David R Custer		2 Your social security number [REDACTED]	
3 Address [REDACTED] Street [REDACTED] Missouri [REDACTED]			
4 Enter year in space provided and check one box. For the tax year ending December 31, <u>2016</u> , I have been unable to obtain (or have received an incorrect) <input checked="" type="checkbox"/> Form W-2 OR <input type="checkbox"/> Form 1099-R. I have notified the IRS of this fact. The amounts shown on line 7 or line 8 are my best estimates for all wages or payments made to me and tax withheld by my employer or payer named on line 5.			
5 Employer's or payer's name, address, and ZIP code [REDACTED]		6 Employer's or payer's identification number (if known) [REDACTED]	
7 Form W-2. Enter wages, tips, other compensation, and taxes withheld.			
a Wages, tips, and other compensation	0	f State income tax withheld	26.00
b Social security wages	0	(Name of state) <u>Missouri</u>	
c Medicare wages and tips	0	g Local income tax withheld	0.00
d Social security tips	0	(Name of locality) <u>NA</u>	
e Federal income tax withheld	4.62	h Social security tax withheld	46.50
		i Medicare tax withheld	10.88
8 Form 1099-R. Enter distributions from pensions, annuities, retirement/profit-sharing plans, IRAs, insurance contracts, etc.			
a Gross distribution	_____	f Federal income tax withheld	_____
b Taxable amount	_____	g State income tax withheld	_____
c Taxable amount not determined	<input type="checkbox"/>	h Local income tax withheld	_____
d Total distribution	<input type="checkbox"/>	i Employee contributions	_____
e Capital gain (included in line 8b)	_____	j Distribution codes	_____
9 How did you determine the amounts on lines 7 and 8 above? The party identified as "payer" on line 5 provided a W-2 that erroneously alleged payment of USC Title 26 Section 3121(a) and 3401(a) "wages" - Hereby Disputed. I also deny that said "payer" and I had any USC Title 26 Section 3121 (b),(e),(h) or 3401(c),(d) "employment" relationship. "Payer" is a private for-profit company, geographically located in one of the 50 union States.			
10 Explain your efforts to obtain Form W-2, Form 1099-R, or Form W-2c, Corrected Wage and Tax Statement.			

None. W-2 was issued before "wages" error was noted. Line 7 (e),(f),(h) and (i) were derived from the W-2 sent to me.

General Instructions

Section references are to the Internal Revenue Code.

Future developments. The IRS has created a page on IRS.gov for information about Form 4852, at www.irs.gov/form4852. Information about any future developments affecting Form 4852 (such as legislation enacted after we release it) will be posted on that page.

Purpose of form. Form 4852 serves as a substitute for Forms W-2, W-2c, and 1099-R and is completed by you or your representatives when (a) your employer or payer does not issue you a Form W-2 or Form 1099-R or (b) an employer or payer has issued an incorrect Form W-2 or Form 1099-R. Attach this form to the back of your income tax return, before any supporting forms or schedules.

You should always attempt to get Form W-2, Form W-2c, or Form 1099-R from your employer or payer before contacting the IRS or filing Form 4852. If you do not receive the missing or corrected form from your employer or payer by February 14, you may call the IRS at 1-800-829-1040 for assistance. You must provide your name, address (including ZIP code), phone number, social security number, and dates of employment, and your employer's or payer's name, address (including ZIP code), and phone number. The IRS will contact your employer or payer and request the missing form. The IRS also will send you a Form 4852. If you do not receive the missing form in sufficient time to file your income tax return timely, you may use the Form 4852 that the IRS sent you.

If you received an incorrect Form W-2 or Form 1099-R, you should always attempt to have your employer or payer issue a corrected form before filing Form 4852.

Note. Retain a copy of Form 4852 for your records. To help protect your social security benefits, keep a copy of Form 4852 until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year. After September 30 following the date shown on line 4, you may use a my Social Security online account to verify wages reported by your employers. Please visit www.ssa.gov/myaccount. Or, you may contact your local SSA office to verify wages reported by your employer.

Will I need to amend my return? If you receive a Form W-2, Form W-2c, or Form 1099-R after your return is filed with Form 4852, and the information differs from the information reported on your return, you must amend your return by filing Form 1040X, Amended U.S. Individual Income Tax Return.

Penalties. The IRS will challenge the claims of individuals who attempt to avoid or evade their federal tax liability by using Form 4852 in a manner other than as prescribed. Potential penalties for the improper use of Form 4852 include:

- Accuracy-related penalties equal to 20 percent of the amount of taxes that should have been paid,
- Civil fraud penalties equal to 75 percent of the amount of taxes that should have been paid, and

Substitute for Form W-2, Wage and Tax Statement, or Form 1099-R, Distributions From Pensions, Annuities, Retirement or Profit-Sharing Plans, IRAs, Insurance Contracts, etc.

OMB No. 1545-0074

Department of the Treasury
Internal Revenue Service

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1 Name(s) shown on return David R Custer	2 Your social security number [REDACTED]
--	---

3 Address
[REDACTED] Street [REDACTED], Missouri [REDACTED]

4 Enter year in space provided and check one box. For the tax year ending December 31, 2016,
I have been unable to obtain (or have received an incorrect) Form W-2 OR Form 1099-R.
I have notified the IRS of this fact. The amounts shown on line 7 or line 8 are my best estimates for all wages or payments made to me and tax withheld by my employer or payer named on line 5.

5 Employer's or payer's name, address, and ZIP code [REDACTED]	6 Employer's or payer's identification number (if known) [REDACTED]
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7 Form W-2. Enter wages, tips, other compensation, and taxes withheld.

a Wages, tips, and other compensation	0	f State income tax withheld	155.00
b Social security wages	0	(Name of state)	Missouri
c Medicare wages and tips	0	g Local income tax withheld	0.00
d Social security tips	0	(Name of locality)	NA
e Federal income tax withheld	377.76	h Social security tax withheld	347.31
		i Medicare tax withheld	81.23

8 Form 1099-R. Enter distributions from pensions, annuities, retirement/profit-sharing plans, IRAs, insurance contracts, etc.

a Gross distribution	_____	f Federal income tax withheld	_____
b Taxable amount	_____	g State income tax withheld	_____
c Taxable amount not determined	<input type="checkbox"/>	h Local income tax withheld	_____
d Total distribution	<input type="checkbox"/>	i Employee contributions	_____
e Capital gain (included in line 8b)	_____	j Distribution codes	_____

9 How did you determine the amounts on lines 7 and 8 above?
The party identified as "payer" on line 5 provided a W-2 that erroneously alleged payment of IRC 26 Section 3121(a) and 3401(a) "wages" - Hereby Disputed. I also deny that said "payer" and I had any IRC 26 Section 3121 (b),(e),(h) or 3401(c),(d) "employment" relationship. "Payer" is a private for-profit company, geographically located in one of the 50 union States.

10 Explain your efforts to obtain Form W-2, Form 1099-R, or Form W-2c, Corrected Wage and Tax Statement.
None. W-2 was issued before "wages" error was noted. Line 7 (e),(f),(h) and (i) were derived from the W-2 sent to me.

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5 Employer's or payer's name, address, and ZIP code
[REDACTED]

6 Employer's or payer's identification number (if known)
[REDACTED]

7 Form W-2. Enter wages, tips, other compensation, and taxes withheld.

a Wages, tips, and other compensation	0	f State income tax withheld	470.00
b Social security wages	0	(Name of state)	Missouri
c Medicare wages and tips	0	g Local income tax withheld	0.00
d Social security tips	0	(Name of locality)	NA
e Federal income tax withheld	1136.61	h Social security tax withheld	971.55
		i Medicare tax withheld	227.22

8 Form 1099-R. Enter distributions from pensions, annuities, retirement/profit-sharing plans, IRAs, insurance contracts, etc.

a Gross distribution		f Federal income tax withheld	
b Taxable amount		g State income tax withheld	
c Taxable amount not determined	<input type="checkbox"/>	h Local income tax withheld	
d Total distribution	<input type="checkbox"/>	i Employee contributions	
e Capital gain (included in line 8b)		j Distribution codes	

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