



Gen	eral Information:								
C	ounty of residence								
					Taxpayer	Spor			
D	o you qualify as disabled?				Yes No	Yes	No		
Aı	o you or your spouse qualify as a 100 percent disabled veter re you 60 years of age or older and did you receive surviving id you make contributions to a health care sharing ministry?	spouse soc		nefits	? Yes	No No No			
Residency Information:			Taxpayer			Spouse			
If you did not live in Missouri for all of 2020:			From (Mo/Da/Yr)			From To (Mo/Da/Yr)			
"	Enter the dates you did live in Missouri	L			(	(	,	(	
	Enter the dates you lived in the other state	-							
Er	nter the state names other than Missouri where you had inco	-							
	,					-			
	cation Savings:  d you or your spouse make any contributions to a Missouri S (MOST) account?  If Yes, enter the following:	•	•		Yes No				
TS	Name of Designated Beneficiary		Social Security Number		Account Number		2020 Amount Contributed		
	untary Contributions:  Inter the amount you wish to contribute on your 2020 tax returns.	urn to:							
	Children's Trust Fund			Pediatric Cancer Research Trust Fund					
	Veteran's Trust Fund			American Heart Association Fund					
Elderly Home Delivered Meals Trust Fund			American Lung Association of						
Missouri National Guard Trust Fund			Missouri Fund						
Workers' Memorial Fund		Amyotrophic Lateral Sclerosis (ALS)							
	Childhood Lead Testing Fund		Fund						
	American Cancer Society Heartland		Arthritis Foundation Fund						
	Division Inc., Fund		March of Dimes Fund						
American Diabetes Association		Muscular Dystrophy Association Fund							
Gateway Area		National Multiple Sclerosis Society Fund							
Breast Cancer Awareness Fund		Missouri Military Family Relief Fund							
Foster Care and Adoptive Recruitment and			General Revenue Fund						
	Retention Fund				gan Donor Prograr				
	Missouri National Guard Foundation Fund							·	





## **Property Tax Information:**

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County or city where you paid real estate tax	
Enter the amounts you paid on your homestead to:	
Rental payments	
County real estate tax	
City real estate tax	
School tax	
Percent of real estate tax applicable to homestead	
Total number of acres	
If the homestead is used for business or rental purposes enter:	
Total number of rooms	
Number of rooms used for business or rental	
Did you own or occupy your home for the entire year	Yes No
	165 116
Inter Any Additional Missouri Information:	