

UNIVERSITY OF MISSOURI SYSTEM STATEMENT OF TAX RESPONSIBILITY

I, _____, a resident of _____, formally
(printed name) *(state of residence)*
request the University of Missouri not withhold Missouri income taxes from my pay due to the
following circumstance:

_____ I am performing services for the University outside of Missouri and reside outside of
Missouri.

_____ I am receiving a pension benefit and reside outside of Missouri.

_____ I am a beneficiary receiving a pension benefit and reside outside of Missouri.

In doing so, I realize that I accept full responsibility for paying income taxes to my state of residence by means required of said state, (e.g., by filing Estimated Income Tax returns or other means that may be required by the state). This request will continue until a new form is submitted indicating a change in my state of residence. If I become a resident of Missouri, I will fill out the appropriate Missouri W-4 or W-4P form to initiate Missouri taxes.

(Signature)

(Employee ID)

(Date)

