



Department Use Only (MM/DD/YY)

Three empty boxes for department use only.



23320010001

Social Security Number

Three boxes for Social Security Number with hyphens.

Taxpayer Name

Empty box for Taxpayer Name.

Qualifications and Instructions

If you are a self-employed individual and were not able to deduct all of your health care premiums from your federal adjusted gross income, you may be eligible for a tax credit equal to the portion of your federal tax liability incurred due to the inclusion of your health care premiums in your federal adjusted gross income. To qualify for this credit your tax liability must be less than \$3,000.00 before other credits.

Tax Liability Limitation - Do I qualify?

Add the amount from Form MO-1040, Lines 33 plus 31 and any lump sum distribution on Line 34 and enter here.

Box for tax liability limitation with .00 suffix.

Is this amount equal to or greater than \$3,000.00?

No - Continue to short or regular method to calculate your Self-employed Health Insurance Tax Credit.

Yes - STOP. You do not qualify for the Self-employed Health Insurance Tax Credit.

Calculate your tax credit by using either method below and enter the total on the Miscellaneous Income Tax Credits (Form MO-TC). Self-employed individuals with itemized deductions are limited on their federal return because their federal adjusted gross exceeded income the limits established by the Internal Revenue Service should use the Regular Method. If you are filing a combined return, and both spouses were self-employed and paid health insurance premiums, each spouse must file a separate Form MO-SHC and only include their portion of the amounts from each of the federal and Missouri return lines referenced below.

Short Method

Table with 8 rows for Short Method calculations, including Federal taxable income, health insurance premiums, and Missouri Tax.

Regular Method

Table with 4 rows for Regular Method calculations, including Federal adjusted gross income, health insurance premiums, and standard/itemized deductions.

**Regular Method (Continued From Page 1)**

- |   |    |  |     |
|---|----|--|-----|
| 5. Subtract Line 4 from Line 3 . . . . .  | 5  |  | .00 |
| 6. Calculate an adjusted federal tax by computing the amount on Line 5 with the federal tax tables.<br>Enter the adjusted amount here . . . . .   | 6  |  | .00 |
| 7. If you paid an alternative minimum tax, use the revised federal adjusted gross income from Line 4 on this worksheet to recalculate the tax calculated on Form 6251, and enter the revised amount. . . . .  | 7  |  | .00 |
| 8. Missouri Tax from Form MO-1040 Line 35. . . . .  | 8  |  | .00 |
| 9. If you reduced your tax by any of the credits listed on Federal Schedule 3, use the revised federal adjusted gross income from Line 3 on this worksheet to recalculate each of the credits to which you are eligible, and enter the total of all the credit amounts. . . . . | 9  |  | .00 |
| 10. Subtract Line 9 from Line 8 . . . . .   | 10 |  | .00 |
| 11. Total other taxes from Federal Schedule 2. . . . .  | 11 |  | .00 |
| 12. Add Lines 10 and 11. This is your revised federal tax liability . . . . .   | 12 |  | .00 |
| 13. Federal income tax from Federal Form 1040 or Federal Form 1040-SR, Line 16 . . . . .  | 13 |  | .00 |
| 14. Subtract Line 12 from Line 13. . . . .  | 14 |  | .00 |
| 15. Missouri tax from Form MO-1040 Line 35 . . . . .  | 15 |  | .00 |
| 16. Enter the smaller amount of Line 14 or 15. This is your self-employed health insurance tax credit. Report on Form MO-TC. . . . .  | 16 |  | .00 |


<b>Signature</b>	I am aware of any applicable reporting requirements of <a href="#">Section 135.805 RSMo</a> and the penalty provisions of <a href="#">Section 135.810 RSMo</a> .		
	Taxpayer's Signature	Printed Name	Date (MM/DD/YYYY) ____ / ____ / ____



This form, pages one and two of Federal Form 1040, or Federal Form 1040-SR and Federal Schedule C, if applicable, must be attached to the Miscellaneous Income Tax Credits (Form MO-TC) along with your tax return.

**Mail to:** Taxation Division  
P.O. Box 27  
Jefferson City, MO 65105-0027

**Phone:** (573) 751-3220  
**Fax:** (573) 522-8619  
**TTY:** (800) 735-2966



**E-mail:** [taxcredit@dor.mo.gov](mailto:taxcredit@dor.mo.gov)  
Visit [dor.mo.gov/taxation/individual/tax-types/income/](http://dor.mo.gov/taxation/individual/tax-types/income/) for additional information.

Form MO-SHC (Revised 12-2023)

**Ever served on active duty in the United States Armed Forces?**  
If yes, visit [dor.mo.gov/military/](http://dor.mo.gov/military/) 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 [veteranbenefits.mo.gov/state-benefits/](http://veteranbenefits.mo.gov/state-benefits/).