| | MISSOURI DEPARTMENT OF REVENUE P.O. BOX 898 JEFFERSON CITY, MO 65105-0898 (573) 751-2326 TDD 1-800-735-2966 | 2011 INT-3 | | | | | | |
|---|---|----------------|---------------|------------|------------------|--------|--|--|
| | SAVINGS & LOAN ASSOCIATION — BUILDING & LOAN ASSOCIATION TAX RETURN | (Rev. 10/2011) | | | | | | |
| 2012 1 | TAXABLE YEAR BASED ON THE 2011 CALENDAR YEAR IN | COME PERIOD | | DI | JE DATE April 17 | , 2012 | | |
| NAME | | | | | | | | |
| ADDRES | S | | | | | | | |
| CITY, ST | ATE, ZIP CODE | | | | | | | |
| FEDERAI | L EMPLOYER IDENTIFICATION NUMBER | COUNTY NAME | | COUNTY | CODE | | | |
| During this taxable year, have you been notified of a change in your federal net income or federal income taxes for any period? (If yes, submit schedule of changes.) | | | | | □ Yes □ No | | | |
| | : A COPY OF THE FEDERAL RETURN AND SUPPORTING S | | | | | | | |
| PART | | CHEDOLES MOS | T BE ATTACHED | | DREIORN. | | | |
| | Federal taxable income (loss) from Federal Forms 1120, Line 28 or 1120S, L | ine 21 | | 1 | | | | |
| 2. | ADDITIONS Income from state and/or political subdivision obligations not included in federal income (explain if different from tax-exempt interest on the federal return) | | | | | | | |
| 3. | Income from federal government securities not included in federal income | | 3 | | | | | |
| 4. | Bad debt claimed on federal return (| | | | | | | |
| 5. | Net bad debt recoveries | | | | | | | |
| 6. | Missouri S & L Association — B & L Association tax deducted on federal return | | | | | | | |
| 7. | Taxes deducted on federal return, claimed as credits on this return (must be detailed on Schedule A or attachment) | | | | | | | |
| 8. | Other additions (attach detailed schedule) | | | | | | | |
| 9. | TOTAL of Lines 1 through 8 | | | 9 | | | | |
| PART | | | | | 1 | | | |
| 10. | Net bad debt charge offs | | | | | | | |
| 11. | Federal income tax deduction (see instructions) | | | | | | | |
| 12. | Charitable contribution in excess of allowable federal deduction | | | | | | | |
| 13. | | | | | | | | |
| 14. | Total of Lines 10, 11, 12, and 13 | | | | | | | |
| 15. | Taxable income (Line 9 less Line 14) | | | 15 | | | | |
| PART | III COMPUTATION OF TAX | | | | 1 | | | |
| 16. | Tax — Multiply Line 15 by 7% (if apportionment required, see instructions) | | | | | | | |
| 17. | Credits from Line 7 above | | | 17 | | | | |
| 18. | Tax after allowable credits (subtract Line 17 from Line 16) | | | 18 | | | | |
| 19A. | Less tentative payment or amount previously paid | | | <u>19A</u> | | | | |
| 19B. | Miscellaneous credits (attach schedule and approved authorizations) | | | 19B | | | | |
| 19C. | Enterprise Zone Credit (attach certificate of eligibility) | | | 19C | | | | |
| 20. | Less overpayment of previous year's tax | | | 20 | | | | |
| 21. | Balance due or overpaid (Line 18 less Lines 19A, 19B,19C, and 20) | | | 21 | | | | |
| 22. | Interest for delinquent payment after April 17, 2012 (see instructions) | | | 22 | | | | |
| 23. | TOTAL AMOUNT DUE OR OVERPAYMENT TO BE REFUNDED (Line 21 pl | lus Line 22) | | | | | | |

| SCHEDULE A — TAXES CLAIMED AS CREDITS | | | | | | | | | | |
|---|-----------------------------------|------------------------|------------------|-----------------|---------------|--|--|--|--|--|
| DESCRIPTION (Do not list tangible personal pro | perty tax on leased prope | rty) | | AM | OUNT | | | | | |
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| TOTAL (Enter on Lines 7 and 17, Page 1) | | | | | | | | | | |
| AUTHORIZATION | | | | | | <u>. </u> | | | | |
| I authorize the Director of Revenue or delegate to discuss my r | eturn and attachments with the pr | enarer or any member (| of his/har firm | r if internally | prepared any | | | | | |
| member of the internal staff. | | | 51 mis/ner mm, c | n in internally | prepared, any | | | | | |
| | | 10 | | | | | | | | |
| SIGNATURE — PLEASE SIGN BELOW | | | | | | | | | | |
| 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/she has any knowledge. I 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 also declare that I am a business entity, I participate in a federal work authorization program with respect to the employees working in connection with any contracted services and I do not knowingly employ any person who is an unauthorized alien in connection with any contracted services. | | | | | | | | | | |
| SIGNATURE OF OFFICER (REQUIRED) | TITLE OF OFFICER | | PHONE NUMBER | } | DATE SIGNED | | | | | |
| | | | | | == | | | | | |
| | | | | | | | | | | |
| PREPARER'S SIGNATURE (INCLUDING INTERNAL PREPARER) | PREPARER'S FEIN, SSN, OR PTIN | | PHONE NUMBER | | DATE SIGNED | | | | | |
| | | | | | | | | | | |
| MAKE CHECK OR MONEY ORDER PAYABLE TO "MISSOU process the check electronically. Any returned check may be p DEPARTMENT OF REVENUE, P.O. BOX 898, JEFFERSON (| resented again electronically. MA | | | | | | | | | |