

2011 INT-5 (REV. 10-2011)

	YEAR — BASED ON THE 2011 CALENDA	AR YEAR INCOME PERIOD		DUE DATE A	pril 17, 2012	
NAME						
ADDRESS						
CITY, STATE, ZIP CODE						
FEDERAL EMPLOYER IDENTIFICATION NUMBER COUNTY NAME CO			COUN	UNTY CODE		
PART I						
	derived from all sources during 2011			1		
Gross income derived from notes and mortgages				2		
3. Ratio of Line 2 to Line 1					%	
4. Total of dividends declared and credited (whether paid or not) to share accounts of members in 2011						
5. Taxable portion of dividends (% Line 3 multiplied by Line 4)						
6. Amount of tax for 2012 (2% of Line 5)						
6A. Miscellaneous credits (attach schedule)						
6B. Enterprise Zone Credit						
6C. Missouri ta	ax — Line 6 less Lines 6A and 6B			6C		
7. Interest for delinquent payment after April 17, 2012						
8. Total Amount Due						
PART II — POLI	TICAL SUBDIVISIONS TAXING THE REPO	ORTING ASSOCIATION				
·	oleted — Information is shown on your Real or Pe					
County	NAME OR NUMBER	R				
City or Town						
Road District						
School District						
Library District						
Water District						
Sewer District						
Fire District						
Other Districts						

This return is to be filed by all Farmer's Cooperati	ve Credit Associations autho	rized to do business	in Missouri.	
PART III				
STATE OF MISSOURI				
ss				
COUNTY OF				
We, the undersigned				, as President, and
	, as Secretary of			
Association, a corporation organized under an Ac Missouri, state that the statements made in the a extension of agricultural credit to its members; the absorb and pay these taxes without charging the	above return are true; that th hat said Association, by auth	e principal business nority of a resolution	s of said Association	n during 2011 was the
PRESIDENT				
SECRETARY				
AUTHORIZATION				
I authorize the Director of Revenue or his/her delegate to di member of the internal staff.	scuss my return and attachments w	rith the preparer or any r	member of his/her firm,	or if internally prepared, any
SIGNATURE — PLEASE SIGN BELOW				
Under penalties of perjury, I declare that I have e my knowledge and belief, it is true, correct, and che/she has any knowledge. I declare under per law and that I am not eligible for any tax exempti participate in a federal work authorization progrado not knowingly employ any person who is an ur	omplete. Declaration of prep nalties of perjury that I empl on, credit or abatement if I e m with respect to the employ	parer (other than tax oy no illegal or una mploy such aliens. I vees working in con	payer) is based on authorized aliens as I also declare that I nection with any co	all information of which defined under federal am a business entity, I
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 "MISS process the check electronically. Any returned check may be				

DEPARTMENT OF REVENUE, P.O. BOX 898, JEFFERSON CITY, MO 65105-0898.