	MISSOURI DEPARTMENT OF REVENUE
	STATEMENT OF INCOME TAX PAYMENTS FOR
	NONRESIDENT INDIVIDUAL PARTNERS OR
Minne	S CORPORATION SHAREHOLDERS

2011	DLN
FORM	

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FOR CALENDAR YEAR 2011 OR FISCAL	YEAR BEGINNING		, 2011 AND ENDING	, 2012
1. NAME OF PARTNERSHIP/S CORPORATION		DOR ONLY	2. MISSOURI TAX ID NUMBER	
ADDRESS			3. FEDERAL ID NUMBER	
CITY OR TOWN	STATE	ZIP CODE	4. TYPE OF ENTITY	
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5. NAME OF PARTNER/SHAREHOLDER			6. SOCIAL SECURITY NUMBER	a a a a a a a a a a a a a a a a a a a
ADDRESS			7. INCOME SUBJECT TO TAX	
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CITY OR TOWN	STATE	ZIP CODE	8. MISSOURI INCOME TAX PAYMENT	00
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Partner/Shareholder copy — Keep th	is copy for your records	5	Copy A	
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STATEMENT OF INCOME TA NONRESIDENT INDIVIDUAL S CORPORATION SHAREHO	X PAYMENTS FOR PARTNERS OR	2011 FORM MO-2NR	DLN	
FOR CALENDAR YEAR 2011 OR FISCAL YEAR BEGINNING			, 2011 AND ENDING	, 2012
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CITY OR TOWN	STATE	ZIP CODE	8. MISSOURI INCOME TAX PAYMENT	00

Attach to Form MO-1NR. See instructions for Line 1 of MO-1NR.

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