



Due date April 15, 2014

Name									
Address									
City					State			Zip Code	
Federal Employer Identification Number (FEIN)					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 schedules must be attached to this return.

Part 1 - Additions	1. Federal taxable income (loss) from Federal Forms 1120, Line 28 or 1120S, Line 21	1	
	2. Income from state or political subdivisions obligations not included in federal income (see instructions if different from Federal Forms 1120 or 1120S).....	2	
	3. Income from federal government securities not included in federal income	3	
	4. Charitable contribution claimed on federal return (attach schedule).....	4	
	5. Bad debt claimed on federal return ☐ Reserve method ☐ Direct write-off method ☐ Other	5	
	6. Net bad debt recoveries	6	
	7. Missouri Bank Franchise tax deducted on federal return.....	7	
	8. Taxes deducted on federal return, claimed as credits on this return (must be detailed on Schedule A or attachment)	8	
	9. Other additions (attach detailed schedule).....	9	
	10. Total of Lines 1 through 9	10	
Part 2 - Deductions	11. Net bad debt charge offs.....	11	
	12. Federal income tax deduction (see instructions).....	12	
	13. Other deductions (attach detailed schedule).....	13	
	14. Total of Lines 11, 12, and 13.....	14	
	15. Total income before charitable contribution deduction (Line 10 less Line 14)	15	
	16. Less charitable contribution deduction (limit is 5% of Line 15)	16	
	17. Taxable income (Line 15 less Line 16)	17	
Part 3 - Computation of Tax	18. Tax at 7% of Line 17 (if apportionment required, see instructions).....	18	
	19A. Less Bank Franchise Tax from Schedule BF, Line 7A.....	19A	
	19B. Less credits from Line 8.....	19B	
	20A. Less tentative payment or amount previously paid	20A	
	20B. Overpayment of previous year's tax	20B	
	20C. Miscellaneous credits (attach schedule and approved authorizations).....	20C	
	20D. Enterprise Zone Credit (attach certificate of eligibility).....	20D	
	20E. Bank Franchise Tax Credit: Total available \$ _____ Amount transferred to corporate income tax \$ _____ Amount claimed on this return	20E	
	21. Balance due or overpaid	21	
	22A. Interest for delinquent payment after April 15, 2014 (see instructions).....	22A	
	22B. Additions to tax (see instructions)	22B	
	23. Subtotal (Lines 21, 22A, and 22B)	23	
	24. Plus Schedule BF (Line 7I)	24	
	25. Total amount due or overpayment to be refunded (Line 23 plus Line 24)	25	

Description (Do not list tangible personal property tax on leased property)	Amount
Total (Enter on Lines 8 and 19B, Page 1)	

I authorize the Director of Revenue or delegate to discuss my return and attachments with the preparer or any member of his or her firm, or if internally prepared, any member of the internal staff ☐ Yes ☐ No

Under penalties of perjury, I declare that the above information and any attached supplement is true, complete, and correct. Declaration of preparer (other than taxpayer) is based on all information of which he or she has any knowledge.

Signature of Officer (Required)	Title of Officer	Phone Number () -	Date (MM/DD/YYYY) / /
Preparer's Signature (Including Internal Preparer)	Preparer's FEIN, SSN, or PTIN	Phone Number () -	Date (MM/DD/YYYY) / /

Make check or money order payable to "Missouri Department of Revenue". Mail completed form and attachments to the address below. If you pay by check, you authorize the Department of Revenue to process the check electronically. Any returned check may be presented again electronically.

Mail to: Taxation Division
P.O. Box 898
Jefferson City, MO 65105-0898

Phone: (573) 751-2326
TDD: (800) 735-2966
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Visit <http://dor.mo.gov/business/finance>
for additional information.

