3	Form Missouri Department of Reve		Missour	i S Co	rporation	Income Tax F	leturr	n for	2013	
MO-1120S S Corporation Income Tax Retu		Return	Beginning, 20 End			End	ing .	, 20		
	0.6 1/4 1 10 1000 001			Corporation Franchise Tax Return for 2014, 20 Ending, 20						
Corp	oration Name	MO Tax I.D. Numb	per	Charte	r Number			Fed	leral I.D. Number	
Add	ress	City			' 		Balar		ce Sheet Date (MM/DD/YYY	
_	ct Applicable Boxes Amended Return Name A. Select this box if your assets in Missouri (Schedule MO-FT, Line 6b) do not exceed \$10,0	edule MO-FT, Line 6a), or appo	ortione	d to Miss	souri B.	Retu	urn f	Return Bankruptcy filed for both and franchise)	
	do exceed the \$10,000,000 threshold, you must franchise tax due on the Form MO-1120S, Line 15	complete and attach So	chedule M	10-FT	and enter	r the 🔲 C.	Retu	urn f	filed for income tax only filed for franchise tax only	
SCorp	 Does the S corporation have any Missouri modifications? Yes No If Yes, complete Lines 1–15 below and page 2. Does the S corporation have any nonresident shareholders? Yes No If Yes, complete Lines 1–15 below and Schedule MO-NRS. Does the S corporation have income derived from sources other than Missouri? Yes No If Yes, complete Lines 1–15 below and Schedule MO-NRS. 									
	Attach a detailed explanation of each Addition	n and Subtraction.								
	Additions									
	1a. State and local income taxes deducted on Federal Form 1120S			. 1a			00			
S	1b. Less: Kansas City & St. Louis earnings taxes. Enter Lines 1a less 1b or						00	1	00	
en	2a. State and local bond interest (except Missouri			. 2a			00		00	
	2b. Less: related expenses (omit if less than \$500) Enter Line 2a less Line 2b on Line 2					_	000			
<u>"</u>	3. Partnership Fiduciary Other a)	00	3	00	
5	Donations claimed for the Food Pantry Tax Credit					-/	- 1	4	00	
5	5. Total of Lines 1 through 4						-	5	00	
מ	Subtractions							5	00	
5	6a. Interest from exempt federal obligations			6a			00			
٥	6b. Less: related expenses (omit if < \$500) Enter L						00	6	00	
ה ל								7	00	
É	7. Amount of any state income tax refund included in federal ordinary income					8	00			
Missouri s-corporation Adjustments	9. Partnership Fiduciary Build A	merica and Recovery Z	one Bond	l Intere	est			0		
<i>"</i>	Missouri Public-Private Transportation Act							9	00	
	10. Missouri depreciation basis adjustment (Section							10	00	
	11. Depreciation recovery on qualified property that is sold (Section 143.121.3(9), RSMo)						11	00		
	12. Total Subtractions - Add Lines 6 through 11.							12	00	
	12 Missouri Coorneration adjustment Not Add	litian avasas Lina E s	war Lina i	10			Γ	13	oc	
Missouri S corporation adjustment — Net Addition — excess Line 5 over Line 12					- H		00			
								14	00	
	15. Corporation Franchise Tax (Complete Schedule MO-FT and attach balance sheet)						15	00		
X U	16. Tax credits — (attach Form MO-TC and only						- +	16	00	
บ บ	17. Approved overpayments applied from last file period						17	00		
	18. Payments with Form MO-7004						18	00		
2	19. Amended Return Only: Tax paid with (or after) the filing of the original return						19	00		
rranchise lax	20. Subtotal — add Lines 16 through 19						20 21	00		
_	22. Total — Line 20 less Line 21						+	22	00	
									100	
₹	23. If Line 22 is greater than Line 15, enter overpayment here					[23	00		
ă	24. Overpayment to be applied to next filing period					[24	00		
<u> </u>	25. Overpayment to be refunded — Line 23 less Line 24						25	00		
<u> </u>						26	00			
훒					27	00				
Refund or Tax Due	28. Total Due — add Lines 26 and 27 (U.S. funds only)					28	00			
อ	Under penalties of perjury, I declare that the above information and any attached supplement is true, complete, and correct. authorize the Director of Revenue or delegate to discuss my return and attachments with the preparer or any member					P.C.				
atu Tu	of his or her firm, or if internally prepared, any member of the internal staff. Yes No							R Only S S E B		
Signature							_ □	Pate Signed (MM/DD/YYYY)		
S	Preparer's Signature (Including Internal Preparer) Preparer's FEIN, SSN, or PTIN Phone Number				D	Date Signed (MM/DD/YYYY)				

Name of each shareholder. All shareholders must be listed. Use attachment if necessary.	2. Check box if shareholder is nonresident	3. Social Security Number	4. Shareholder's Share %	5. Shareholder's Corporation Adjustment Addition Subtraction					
a)			%	00					
b)			%	00					
c)			%	00					
d)			%	00					
e)			%	00					
f)			%	00					
g)			%	00					
h)			%	00					
i)			%	00					
j)			%	00					
k)			%	00					
1)			%	00					
m)			%	00					
n)			%	00					
0)			%	00					
p)		-	%	00					
q)		-	%	00					
r)		-	%	00					
s)		-	%	00					
t)			%	00					
u)			%	00					
v)			%	00					
w)			%	00					
x)			%	00					
Total			%	00					
Column 4 — Enter percentages from Federal Schedule K-1(s). Round percentages to whole numbers. Column 5 — Enter Missouri S corporation adjustment from Form MO-1120S, Line 13 or 14, as total of Column 5. Multiply each percentage in Column 4 by the total in Column 5. Indicate at the top of Column 5 whether the adjustments are additions or subtractions. The amount after each shareholder's name in Column 5 must be reported as a modification by the shareholder on his or her Form MO-1040, Individual Income Tax Return, either as an addition to, or subtraction from, federal adjusted gross income.									

MO Tax I.D. Number

Charter Number

Federal I.D. Number

Mail To: Balance Due:

Corporation Name

Missouri Department of Revenue P.O. Box 3365 Jefferson City, MO 65105-3365 **Refund or No Amount Due:**

Missouri Department of Revenue

P.O. Box 700

Jefferson City, MO 65105-0700

Form MO-1120S (Revised 12-2013)

Phone: (573) 751-4541

E-mail: corporate@dor.mo.gov

Fax: (573) 522-1721



5	
1	Schedule
	MO-FT
T	3

Missouri Department of Revenue

2014 Corporate Franchise Tax Schedule

		<i>F</i>	Attachr	nent Sec	quence No	. 1120-03 a	and 11	205-01		
	Corporation Name	souri Tax Identification Number								
Information	Observa Namelson	D. Niverskaan		-: ^ -! -						
Ba Ba	Charter Number Federal Employer I.	ail Add	iress							
0	File Period Beginning (MM/DD/YYYY) Ending (MM/DD/YYYY) Balance Sheet Date (MM/DD/YYYY)									
	//									
ario	Do your assets include an interest in a partnership or limited liability company?									
corporation	No Yes If yes, you must provide a detailed reconciliation of partnership assets.									
5	Has there been a change in your accounting period?									
	No Yes If yes, state prior accounting period:									
	Read instructions before completing this schedule. Note: Y	You cannot file a consoli	dated	franc	hise tax	return.				
• C	Corporations having all assets within Missouri complete Lines 1, 2, 6a,	, and 7 only.								
• C	Corporations having assets both within and without Missouri complete	all lines except 6a.								
	Par value of issued and outstanding stock (for no-par value stock, see in	nstructions) (not less than z	ero)	1				00		
	2. Assets									
	2a. Total assets per attached balance sheet							00		
	2b. Less: Investments in or advances to subsidiaries over 50% owned (2b				00				
	or a schedule showing name of corporations, percentage of ownership, and amount)							00		
	2c. Adjusted total (Line 2a less Line 2b)					erywhere	!	- 00		
	3a. Accounts receivable (net of allowance for bad debt) 3a	()	00	3a	()	,		00		
	3b. Inventories (net, book value)		1	3b				00		
	3c. Land and fixed assets (net of accumulated depreciation) 3c		00	3c				00		
	3d. Total allocated assets (add Lines 3a, 3b, and 3c) 3d		00	3d				00		
	4. Missouri percentage for apportionment (Line 3d, Column A divided by Co	3u				- 00				
<u>e</u>	Extend the apportionment percentage to six digits to the right of the decimal point							%		
Schedu	5. Assets apportioned to Missouri (Line 2c times Line 4)							00		
	6. Tax basis:									
ax	6a. Corporations having all assets within Missouri (Line 2c or Line 1, whichever is greater)							00		
S C	6b. Corporations having assets both within and without Missouri (Line 5, or the product of Line 1 times Line 4, whichever is greater).							00		
Franchise	If Line 6a or Line 6b is \$10,000,000 or less, Stop Here and check Bo	6b				00				
	Box A on Form MO-1120S.									
	7. Tax Computation									
	7a. Tax — 1/75th of 1% (.000133 of Line 6a or Line 6b)		'a				00			
	7b. Short periods (see instructions) Line 7a x (insert number of whole months in short period) = Prorated									
	12	Tax Due	'b				00			
	7c. Computed current year tax (enter the amount from Line 7a or Line 7b	b, whichever applies)		7c				00		
	7d. Base Year Franchise Tax. Enter the franchise tax from the return for the taxable year ending on or before December 31, 2010 (before the tax is prorated, if the return is for a short period). If the corporation had no franchise tax filing requirement for the taxable year ending on or before December 31, 2010, the base year is the franchise tax liability for the corporation's first full taxable							_		
	year on or after the taxable year ending December 31, 2010. If this is									
	had a filing requirement, skip this line and go to Line 7e		7d				00			
	7e. Tax due. Enter the smaller of Line 7c or Line 7d here and on Form I	7e								
	MO-1120S, Line 15. If no amount was entered on Line 7d, enter the amount from Line 7c							00		

Schedule MO-FT (Revised 12-2013)

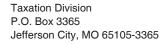
Schedule MO-FT must be filed with the Form MO-1120 or Form MO-1120S. Please attach to either form and mail to the appropriate address as shown on page 1 of the MO-1120 or MO-1120S.

Phone: (573) 751-4541

E-mail: franchise@dor.mo.gov

Fax: (573) 522-1721





Visit http://dor.mo.gov/business/franchise/ for additional information.

