

| 20                          | 15 Tax   | able year based on the 2014 calendar year income period  |       | Due date April 15, 2015 |      |  |  |
|-----------------------------|----------|--|-------|-------------------------|------|--|--|
| Nar                         | me       |  |       |                         |      |  |  |
| Ado                         | dress    |  |       |                         |      |  |  |
| City                        | /        | Zip Code   |       |                         |      |  |  |
| Fed                         | leral Em | ployer Identification Number (FEIN) County Name  |       | County Code             |      |  |  |
|                             |          |  |       |                         |      |  |  |
|                             | -        | s taxable year, have you been notified of a change in your federal net income or federal inc<br>any period? (If yes, submit schedule of changes) |       | 🗍 Yes                   | 🗖 No |  |  |
|                             |          | A copy of the federal return and supporting schedules must be attach   | ed to | this return.            |      |  |  |
|                             | 1.       | Federal taxable income (loss) from Federal Forms 1120, Line 28 or 1120S, Line 21   | 1     |                         |      |  |  |
|                             | 2.       | Income from state and political subdivision obligations not included in federal income   |       |                         |      |  |  |
|                             |          | (explain if different from tax-exempt interest on the federal return)  |       |                         |      |  |  |
| s                           | 3.<br>4. | Income from federal government securities not included in federal income<br>Bad debt claimed on federal return Reserve Method                    | 3     |                         |      |  |  |
| ition                       |          | Direct write-off method Other  | 4     |                         |      |  |  |
| Part 1 - Additions          | 5.       | Net bad debt recoveries  | 5     |                         |      |  |  |
| rt 1 -                      | 6.       | Missouri S & L Association - B & L Association tax deducted on federal return  | 6     |                         |      |  |  |
| Pal                         | 7.       | Taxes deducted on federal return, claimed as credits on this return<br>(must be detailed on Schedule A or attachment)                            | 7     |                         |      |  |  |
|                             | 8.       | Other additions (attach detailed schedule)   | 8     |                         |      |  |  |
|                             | 9.       | Total of Lines 1 through 8   | 9     |                         |      |  |  |
| s                           | 10.      | Net bad debt charge offs   | . 10  |                         |      |  |  |
| stion                       | 11.      | Federal income tax deduction (see instructions)  | . 11  |                         |      |  |  |
| Part 2 - Deductions         | 12.      | Charitable contribution in excess of allowable federal deduction   | 12    |                         |      |  |  |
| 2 - D                       | 13.      | Other deductions (attach detailed schedule)  | 13    |                         |      |  |  |
| Part                        | 14.      | Total of Lines 10, 11, 12, and 13  | . 14  |                         |      |  |  |
|                             | 15.      | Taxable income (Line 9 less Line 14)   | . 15  |                         |      |  |  |
|                             | 16.      | Tax — Multiply Line 15 by 7% (if apportionment required, see instructions)   | 16    |                         |      |  |  |
| ×                           | 17.      | Credits from Line 7 above  | 17    |                         |      |  |  |
| Part 3 - Computation of Tax | 18.      | Tax after allowable credits (subtract Line 17 from Line 16)  | 18    |                         |      |  |  |
|                             | 19A.     | Less tentative payment or amount previously paid   | 19A   |                         |      |  |  |
|                             | 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 15, 2015 (see instructions)  | 22    |                         |      |  |  |
|                             | 23.      | Total amount due or overpayment to be refunded (Line 21 plus Line 22)  | 23    |                         |      |  |  |

|                                       | Description (Do not list tangible person  | scription (Do not list tangible personal property tax on leased property) |             |            |                         |  |  |
|---------------------------------------|---|---|-------------|------------|-------------------------|--|--|
|                                       |   |   |             |            |                         |  |  |
|                                       |   |   |             |            |                         |  |  |
|                                       |   |   |             |            |                         |  |  |
|                                       |   |   |             |            |                         |  |  |
|                                       |   |   |             |            |                         |  |  |
|                                       |   |   |             |            |                         |  |  |
| lits                                  |   |   |             |            |                         |  |  |
| s Crec                                |   |   |             |            |                         |  |  |
| ned A:                                |   |   |             |            |                         |  |  |
| : Clain                               |   |   |             |            |                         |  |  |
| Taxes                                 |   |   |             |            |                         |  |  |
| Schedule A - Taxes Claimed As Credits |   |   |             |            |                         |  |  |
| chedu                                 |   |   |             |            |                         |  |  |
| Ň                                     |   |   |             |            |                         |  |  |
|                                       |   |   |             |            |                         |  |  |
|                                       |   |   |             |            |                         |  |  |
|                                       |   |   |             |            |                         |  |  |
|                                       |   |   |             |            |                         |  |  |
|                                       |   |   |             |            |                         |  |  |
|                                       |   |   |             |            |                         |  |  |
|                                       | Total (Enter on Lines 7 and 17, Page 1  |   |             |            |                         |  |  |
| ure                                   | I authorize the Director of Revenue or de   |   | _           |            |                         |  |  |
| signat                                | member of his or her firm, or if internally<br>Under penalties of perjury, I declare th |   | No orrect   |            |                         |  |  |
| and S                                 | Declaration of preparer (other than taxpa   |   | ongol.      |            |                         |  |  |
| Authorization and Signature           | Signature of Officer (Required)   | Title of Officer  | Phone Numbe | ) <b>-</b> | Date (MM/DD/YYYY)       |  |  |
| uthoriz                               | Preparer's Signature (Including Internal Preparer)                                      | Preparer's FEIN, SSN, or PTIN   | Phone Numbe | /          | //<br>Date (MM/DD/YYYY) |  |  |
| ٩ſ                                    |   |   | (           | )          | ///                     |  |  |

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 Fax: (573) 522-1721 E-mail: fit@dor.mo.gov Visit http://dor.mo.gov/business/finance for additional information.



Form INT-3 (Revised 11-2014)

# Missouri Department of Revenue General Instructions - 2014 Savings and Loan Return

#### Section 148.610 - 148.710, RSMo

This information is for guidance only and does not state the complete law.

The 2014 Savings and Loan Return (Form INT-3) must be completed and filed by April 15, 2015. The tax is based upon the taxpayer's net income for the 2014 calendar year. An extension of time for filing this return may be granted by the Director of Revenue. When an extension is granted, the taxpayer is required to pay, as part of any tax due, interest thereon at the rate determined by <u>Section 32.065</u>, <u>RSMo</u>, from the day when such return should have been filed, if no such extension had been granted. Visit the Department's website at <u>http://dor.mo.gov/intrates.php</u> to obtain the annual interest rate. Pursuant to Regulation <u>12 CSR 10-10.070</u>, an extension of time may not exceed 180 days from the due date of April 15.

Review the state law prior to the completion of this tax return, since the Internal Revenue Code and the state law differ in the accounting for various transactions. A copy of your Federal Form 1120 or 1120S must be attached to the Missouri Savings & Loan Tax Return.

If any association operates more than one office or branch in Missouri, the association shall file one return. The association must complete the Financial Institution Tax Schedule B (Form 2331), listing the address of each office or branch and showing the total dollar amount of savings accounts, deposits and repurchase agreements of each office or branch and the total for the association. If an association has an office or offices outside Missouri, the total of the dollar amount of deposits and accounts at an office or offices outside Missouri shall be excluded in determining the total deposits and accounts of the taxpayer. Schedule B must be completed and submitted with the Savings and Loan Tax Return.

All savings and loan associations must complete this tax return reflecting their total business activities from all sources. Savings and loan associations conducting business in multiple states should refer to the instructions for Line 16.

## Instructions

County Code - Enter your three digit county code of the principal place of your institution from the list provided at the end of these instructions.

#### Part I

<u>Line 1</u> Enter the amount of taxable income (loss) from Federal Form 1120, Line 28, before any net operating loss deduction or special deduction is applied, or Federal Form 1120S, Line 21.

Line 2 Enter all income received from state and political subdivision obligations excluded on the federal return. Explain if different from tax-exempt interest shown on the federal return.

<u>Line 3</u> Enter all income received from federal government securities excluded from the federal return.

Line 4 Enter the bad debt claimed on the federal return or any additions to a bad debt reserve claimed as a deduction on the federal return. (The reserve method is not a permissible method on this return.) In the appropriate box, indicate the bad debt method used on the federal return.

<u>Line 5</u> Enter the excess, if any, of recoveries of bad debts previously charged off over current year's charge offs. Attach schedule of bad debt computation.

<u>Line 6</u> Enter the amount of Missouri Savings and Loan tax (imposed by Chapter 148, RSMo) deducted on the federal return.

Line 7 Enter the total credits from Schedule A of this return. The amount of taxes claimed as a deduction on the federal return but claimed as a credit on Line 17 of this return includes all taxes paid directly to the State of Missouri or any political subdivision thereof, except taxes on tangible personal property owned by the taxpayer and held for lease or rental to others, contributions paid pursuant to the unemployment compensation law of Missouri, real estate taxes, social security taxes, sales and use taxes and taxes imposed by this law. Explain the difference, if any, between the amount shown on Line 7 of this return and the federal return. Please submit the schedule of taxes deducted on the federal return for verification purposes. The savings and loan assessment fee is not an allowable credit. The annual registration fee is not an allowable credit because it is not a tax.

<u>Line 8</u> Enter deductions claimed on the federal return which are not allowable on this return and income not included on the federal return which is required to be included on this return. Attach a detailed schedule.

Line 9 Enter the total of Lines 1 through 8.

### Part II

Line 10 Enter the amount of actual bad debt charge offs.

Line 11 Enter the current year deduction for federal income taxes. The current year deduction will be the amount actually accrued (if an accrual basis taxpayer) or paid (if a cash basis taxpayer) during the year. Accrual basis taxpayers that are members of an affiliated group filing a consolidated federal income tax return shall allocate its consolidated federal tax liability among the members of the group for the year by using the method elected to allocate earnings and profits by the group under Internal Revenue Code Section 1552, without regard to any additional allocations under Treasury Regulation 1.1502-33(d). If no election was made, the taxpayer shall allocate according to Section 1552(a)(1), IRC.

Cash basis taxpayers that are members of an affiliated group filing a consolidated federal income tax return shall allocate the consolidated tax paid or refunded during the year by using the method elected to allocate earnings and profits by the group under Internal Revenue Code Section 1552 for the applicable year without regard to any additional allocations under Treasury Regulation 1.1502-33(d). If no election was made, the taxpayer shall allocate according to Section 1552(1)(1), IRC.

<u>Line 12</u> Enter the amount of charitable contributions actually made in excess of the amount allowed, if any, on the federal return. Attach a schedule of charitable contributions if not included with the federal return.

<u>Line 13</u> Enter the total amount of any deduction claimed on this return and not included on the federal return. These deductions must be itemized on a schedule attached to this return.

Line 14 Enter the total amount of Lines 10, 11, 12, and 13.

<u>Line 15</u> Subtract Line 14 from Line 9 and enter net amount. If "loss", indicate by brackets "()" and enter "none" on Line 16.

#### Part III

Line 16 Multiply the taxable income amount on Line 15 by 7 percent and enter result. If Line 9 includes income from business activity both within and without Missouri from offices or branches located in such states, the tax may be eligible to be apportioned on the Financial Institution Apportionment Schedule C (Form 2330), which must be attached to Form INT-3.

Line 17 Enter the amount from Line 7.

Line 18 Subtract Line 17 from Line 16 and enter amount. If amount on Line 17 exceeds amount on Line 16, enter "none".

Line 19A Enter the amount of tentative payment (if applicable).

Line 19B Enter the amount of tax credits claimed from the list below. Attach a schedule listing the amounts for each tax credit. A copy of the approved authorization must be attached to the return.

Line 19C Enter the amount of approved Enterprise Zone Credit claimed. Attach a copy of the certificate of eligibility and calculation of the credit claimed on this return.

Line 20 Enter overpayment of previous year's tax.

Line 21 Subtract Lines 19A, 19B, 19C, and 20 from Line 18.

Line 22 Any tax due on this return not paid by April 15, 2015 is delinguent, and interest will be charged on such amount at the annual interest rate. The annual interest rate can be obtained from the Department's website at http://dor.mo.gov/intrates.php. Enter the interest on this line.

Line 23 Enter the total of Lines 21 and 22. If a balance due, submit this amount. Make check payable to "Missouri Department of Revenue".

Affordable Housing Assistance Family Farms Act Agricultural Products Utilization Alternative Fuel Infrastructure Bond Enhancement Brownfield "Jobs and Investment" Business Use Incentives for Large-scale Development (BUILD) **Community Bank Investment** Demolition Missouri Works Development **Development Reserve Developmental Disability Care Provider** Distressed Areas Land Assemblage Export Finance New Market Family Development Account

Film Production Historic Preservation Infrastructure Development Innovation Campus Maternity Home Missouri Low Income Housing Missouri Quality Jobs Neighborhood Assistance New Enhanced Enterprise Zone New Enterprise Creation New Generation Cooperative **Pregnancy Resource** 

**Rebuilding Communities** Rebuilding Communities and Neighborhood Preservation Act Remediation **Residential Treatment Agency** Shelter for Victims of Domestic Violence Small Business Incubator Small Business Investment Special Needs Adoption Sporting Event Transportation Development Youth Opportunities

| Code | County         | Code | County    | Code | County      | Code | County     | Code | County          |
|------|----------------|------|-----------|------|-------------|------|------------|------|-----------------|
| 001  | Adair          | 047  | Clay      | 093  | Iron        | 139  | Montgomery | 185  | St Clair        |
| 003  | Andrew         | 049  | Clinton   | 095  | Jackson     | 141  | Morgan     | 187  | St Francois     |
| 005  | Atchison       | 051  | Cole      | 097  | Jasper      | 143  | New Madrid | 189  | St Louis County |
| 007  | Audrain        | 053  | Cooper    | 099  | Jefferson   | 145  | Newton     | 193  | Ste Genevieve   |
| 009  | Barry          | 055  | Crawford  | 101  | Johnson     | 147  | Nodaway    | 195  | Saline          |
| 011  | Barton         | 057  | Dade      | 103  | Knox        | 149  | Oregon     | 197  | Schuyler        |
| 013  | Bates          | 059  | Dallas    | 105  | Laclede     | 151  | Osage      | 199  | Scotland        |
| 015  | Benton         | 061  | Daviess   | 107  | Lafayette   | 153  | Ozark      | 201  | Scott           |
| 017  | Bollinger      | 063  | Dekalb    | 109  | Lawrence    | 155  | Pemiscot   | 203  | Shannon         |
| 019  | Boone          | 065  | Dent      | 111  | Lewis       | 157  | Perry      | 205  | Shelby          |
| 021  | Buchanan       | 067  | Douglas   | 113  | Lincoln     | 159  | Pettis     | 207  | Stoddard        |
| 023  | Butler         | 069  | Dunklin   | 115  | Linn        | 161  | Phelps     | 209  | Stone           |
| 025  | Caldwell       | 071  | Franklin  | 117  | Livingston  | 163  | Pike       | 211  | Sullivan        |
| 027  | Callaway       | 073  | Gasconade | 119  | Mcdonald    | 165  | Platte     | 213  | Taney           |
| 029  | Camden         | 075  | Gentry    | 121  | Macon       | 167  | Polk       | 215  | Texas           |
| 031  | Cape Girardeau | 077  | Greene    | 123  | Madison     | 169  | Pulaski    | 217  | Vernon          |
| 033  | Carroll        | 079  | Grundy    | 125  | Maries      | 171  | Putnam     | 219  | Warren          |
| 035  | Carter         | 081  | Harrison  | 127  | Marion      | 173  | Ralls      | 221  | Washington      |
| 037  | Cass           | 083  | Henry     | 129  | Mercer      | 175  | Randolph   | 223  | Wayne           |
| 039  | Cedar          | 085  | Hickory   | 131  | Miller      | 177  | Ray        | 225  | Webster         |
| 041  | Chariton       | 087  | Holt      | 133  | Mississippi | 179  | Reynolds   | 227  | Worth           |
| 043  | Christian      | 089  | Howard    | 135  | Moniteau    | 181  | Ripley     | 229  | Wright          |
| 045  | Clark          | 091  | Howell    | 137  | Monroe      | 183  | St Charles | 510  | St Louis City   |

**County Codes**