



MISSOURI DEPARTMENT OF REVENUE
P.O. BOX 898
JEFFERSON CITY, MO 65105-0898
(573) 751-2326 TDD 1-800-735-2966
CREDIT UNION TAX RETURN

**2009
INT-4**

DLN

2010 TAXABLE YEAR BASED ON THE 2009 CALENDAR YEAR INCOME PERIOD

DUE DATE April 15, 2010

NAME		
ADDRESS		
CITY, STATE, ZIP CODE		
FEDERAL EMPLOYER IDENTIFICATION NUMBER	COUNTY NAME	COUNTY CODE

NOTE: A COPY OF THE NASCUS/NCUA CALL REPORT MUST BE ATTACHED.

PART I

1. Total gross income from NASCUS/NCUA Call Report as of December 31, 2009	1	
ADDITIONS		
2. Recoveries of bad debts from call report	2	
3. Missouri Credit Union tax expensed on call report	3	
4. Missouri taxes claimed as credits on this return from Schedule A	4	
5. Other additions (attach detailed schedule)	5	
6. Total of Lines 1 through 5	6	

PART II DEDUCTIONS

7. Total operating expenses from NASCUS/NCUA Call Report as of December 31, 2009	7	
8. Dividends and interest paid on general shares from call report	8	
9. Loans charged off as bad debts from call report	9	
10. Other deductions (attach detailed schedule)	10	
11. Total of Lines 7 through 10	11	
12. Taxable income (Line 6 less Line 11)	12	

PART III COMPUTATION OF TAX

If apportionment required, see instructions.		
13. Tax — Line 12 multiplied by 7% or from apportionment schedule	13	
14. Tax credits from Line 4 above	14	
15. Tax due (Line 13 less Line 14)	15	
16A. Less tentative payment or amount previously paid	16A	
16B. Miscellaneous credits (attach schedule and approved authorizations)	16B	
16C. Enterprise Zone Credit (attach certificate of eligibility)	16C	
17. Overpayment of previous year's tax	17	
18. Balance due or overpaid (Line 15 less Lines 16A, 16B, 16C, and 17)	18	
19. Interest for delinquent payment after April 15, 2010 (see instructions)	19	
20. TOTAL AMOUNT DUE OR OVERPAYMENT TO BE REFUNDED (Line 18 plus Line 19)	20	

SCHEDULE A — TAXES CLAIMED AS CREDITS	
DESCRIPTION (Do not list real estate taxes or tangible personal property tax on leased property)	AMOUNT
Total (Enter on Lines 4 and 14, Page 1)	

SCHEDULE B — POLITICAL SUBDIVISIONS TAXING THE REPORTING CREDIT UNION	
This section must be completed by credit unions with only one office. If you have more than one office location, you must complete the Financial Institution Tax Schedule B, Form 2331. Information is available from your real or personal property tax receipt.	
PHYSICAL STREET ADDRESS	CITY, STATE, ZIP CODE
SUBDIVISIONS	NAME OR NUMBER
County	
City	
Road District	
School District	
Library District	
Water District	
Sewer District	
Fire District	
Township/Other Tax Districts	

AUTHORIZATION
I authorize the Director of Revenue or delegate to discuss my return and attachments with the preparer or any member of his/her firm, or if internally prepared, any member of the internal staff.
<input type="checkbox"/> YES <input type="checkbox"/> NO

SIGNATURE — PLEASE SIGN BELOW			
Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which he/she has any knowledge. I declare under penalties of perjury that I employ no illegal or unauthorized aliens as defined under federal law and that I am not eligible for any tax exemption, credit or abatement if I employ such aliens. I also declare that I am a business entity, I participate in a federal work authorization program with respect to the employees working in connection with any contracted services and I do not knowingly employ any person who is an unauthorized alien in connection with any contracted services.			
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 "MISSOURI DEPARTMENT OF REVENUE". 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 COMPLETED FORM AND ATTACHMENTS TO THE MISSOURI DEPARTMENT OF REVENUE, P.O. BOX 898, JEFFERSON CITY, MO 65105-0898.**