CO	RPOF	RATION NAME							7									
	111 01	IATION NAIVIL								MAIL TO:			MAIL	TO:				
										Balance Due				or No Amo				
									Missouri Depart P.O. Box 3365				Missouri Department of Revenue P.O. Box 700					
										//O 65105-3	65105-3365 Jefferson City, MO 65			65105-0700				
CIT	V OB	TOWN STATE ZIR CODE							-1 1	,,								
CITY OR TOWN, STATE, ZIP CODE									Н	FORM MO-1120								
	T. 1. 1. 1		OUADTE						41	Missouri C					oration			
МО	TAXI	I.D. NUMBER	CHARTE	R NUMBER		FEDER	AL I.D. NUMBEF	₹	Ш		IE TAX				E TAX			
_	Щ							Щ	41		for 2007			urn for				
		Applicable Boxes	_		Attach copy of					Beginning			-	ng				
┞┕	Cor	nsolidated MO Return	☐ Ame	ended Return	☐ Final Co		☐ Bankr	uptcy	Ш	Ending			-					
		nsolidated Federal/	☐ Nam	ne Change	Income Return	Tax	11200		Ιſ	Balance Sho	eet Date (I	MMD	DYY)	SOFTWARE \	/ENDOR CODE d by DOR)			
Separate Missouri Return Address Change 990T										001								
	A. Check this box if your assets in Missouri (Schedule MO-FT, Line 6a), or apportioned to Missouri (Schedule																	
	MO-FT, Line 6b) do not exceed \$1,000,000. You do not owe franchise tax. If your assets do exceed the																	
\$1,000,000 threshold, you must complete and attach Schedule MO-FT and enter the franchise tax due on the Form MO-1120. Line 15 below. If Box A is checked. Box C must not be checked. D. Return filed for FRANCH											•	v						
Н					,							4	7 11 10 1 11 1					
×		Federal Taxable Income			,							-			00			
ΙŽ	2.	Corporation income tax	trom Mis	ssouri, or othe	er states, their s	ubdivision	s, and Distric	t of			00							
اسِ		Columbia deducted in de									00	-						
S		Missouri modifications –									, , , ,				00			
ĮΫ		4. Total additions — Add Lines 2 and 3									4			00				
OF INCOME TAX		 5. Missouri modifications — Subtractions (complete Page 2, Part 2) 6. Balance — Line 1 plus Line 4 less Line 5 								5			00					
ō												6			00			
		Federal Income Tax —			•	,						7			00			
E		Missouri Taxable Incom										8			00			
Ľ	9. Missouri Taxable Income — if all Missouri income, repeat Line 8. If not, complete Schedule MO-MS and enter apportionment																	
COMPUTATION		method chosen, and the applicable %,, Multiply Line 8 by the percentage								9			00					
S		10. Missouri Dividends Deduction (see instructions before entering an amount)							10			00						
Ö		. Enterprise Zone or Rural Empowerment Zone Income Modification							11			00						
		Missouri Taxable Income — Line 9 less Line 10 and Line 11											00					
		Corporation Income Tax — 6.25% of Line 12												00				
	14. Recapture of Missouri Low Income Housing Credit (attach a copy of Federal Form 8611) (see instructions)											00						
ŕ	15. Corporation Franchise Tax (Complete Schedule MO-FT and attach balance sheet)								15			00						
	16.	Total Tax — Add Lines	13, 14, a	ınd 15								16			00			
MENTS		Tax credits — (attach Fo		,											00			
阊	18. Estimated tax payments (include approved overpayments applied from previous year)											00						
Ž		Payments with Form MC										19	0		00			
ď		AMENDED RETURN O										20			00			
		1. Subtotal — Add Lines 17 through 20										00						
CREDITS/PAY		2. AMENDED RETURN ONLY: Overpayment, if any, as shown on original return or as later adjusted								22	!		00					
Ç	23.	Total — Line 21 less Lin	e 22									23			00			
	24.	If Line 23 is greater than	Line 16	, enter OVEF								24	L		00			
Щ	25	Amount romitted or amo	unt of	Childre		Elderly Home	Missouri National	(Workers) M	orkers Iemori		Missouri Military	Gene	General Revenue	Addl. Trust Fund Code	Addl. Trust Fund Code			
TAX DUE	25.	Amount remitted or amotax overpayment to be	unt of			Delivere	Guard	NO REIS W	011	Testing	Family Relief Fun	d Rever	ine_}	(See Instr.)	(See Instr.)			
X		contributed to the trust for	unds	<u> </u>		Meals			,		101011411		,		'			
		listed to the right			00 00	00	00		00	00 00	00	<u> </u>	00	00	, , , , ,			
OR		Overpayment to be appl										26			00			
₽	27.	Overpayment to be refu	erpayment to be refunded — Line 24 less Lines 25 and 26							. REFUND	27			00				
[جً	28.	If Line 23 is less than Lin	ne 16, ei	nter UNDERF	PAYMENT here							28			00			
REFUND				Interest		Penalty		F	orm	MO-2220								
اعا	29.	Enter total amount on Li	ne 29	\$		\$				\$		29			00			
	30.	TOTAL DUE — Add Lin									TAL DUE				00			
If you pay by check, you authorize the Department of Revenue to process the check electronically. Any check returned unpaid may be presented again electronically.											lly.							
	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													ES DOR				
삤	he/she has any knowledge. As provided in Chapter 143, RSMo, a penalty of up to \$500 shall be imposed on any corporation which flies a frivolous return. I also declare under penalties of perjury that I employ no illegal or unauthorized aliens as defined firm, or if internally prepared, any member of the state of the								ny men	nber of his/		ONLY						
Ē	under federal law and that I am not eligible for any tax exemption, credit or abatement if I employ such aliens.							ır ırıte			ine mie	🗆 Ş						
GNATURE	SIGNATURE OF OFFICER (REQUIRED) TITLE OF OFFICER								PHONE NUMBER DATE SIGN			ATE SIGNED	□E					
SIG	PREPARER'S SIGNATURE (INCLUDING INTERNAL PREPARER) PREPARER'S FEIN, SSN, OR PTIN PHONE						IE NUMBER		DA	ATE SIGNED	⊟ _□ B							
	THE MENT					, , , , , , ,	())				□ F				
МО	360-10	091 (11-2007)		This form i	s available ur	on requ	est in altern	ative ac	cce	ssible forma	t(s).							
		*						MO 860-1091 (11-2007) This form is available upon request in alternative accessible format(s).										

2007 FORM MO-1120 PAGE 2 MISSOURI MODIFICATIONS — ADDITIONS 1a. State and local bond interest (except Missouri) 00 00 1b. Less: related expenses (omit if less than \$500). Enter Line 1a less Line 1b on Line 1 . . | 1b 00 1 2. Fiduciary and partnership adjustment (enter share of adjustment from 00 2 00 3. Missouri depreciation basis adjustment (Section 143.121.2(c), RSMo) 4 00 5. Donations claimed for the Food Pantry Tax Credit that were deducted from federal taxable income, 00 5 Section 135.647, RSMo Total — Add Lines 1 through 5. Enter here and on Page 1, Line 3 6 00 MISSOURI MODIFICATIONS — SUBTRACTIONS 00 00 00 1b. Less: related expenses (omit if less than \$500). Enter Line 1a less Line 1b on Line 1 . . | 1b 00 2 3. Reduction in gain due to basis difference (See 12 CSR 10-2.020 and Section 143.121.3(b), RSMo) 00 00 4. Previously taxed income 4 5 00 00 6 PART 7. Fiduciary and partnership adjustment (enter share of adjustment from Form MO-1041, Page 2, Part 1, 00 7 8. Missouri depreciation basis adjustment (Section 143.121.3(g), RSMo) 8 00 9. Subtraction Modification offsetting previous Addition Modification on 1996, 1997, or 1998 Tax Years 00 9 00 10. Depreciation recovery on qualified property that is sold (Section 143.121.3(i), RSMo) 10 00 11 FEDERAL INCOME TAX — CURRENT YEAR — Consolidated Federal/Separate Missouri Return — See Instructions. 00 1 00 2 3. Federal income tax — add Lines 1 and 2; multiply the total by 50%; and enter here and on Page 1, Line 7. Consolidated federal/separate Missouri returns must complete Lines 4-6 00 3 PART 00 4. Numerator (the amount of separate company federal taxable income) 5 00 5. Denominator (enter the total positive separate company federal taxable income) 6. Divide Line 4 by Line 5. Multiply by Line 3. Enter here and on Page 1, Line 7. (Consolidated federal/separate Missouri return filers must attach consolidated Federal Form 1120, Schedule J, and an income statement or summary of profit companies. 00 If information is not sent, the federal income tax deduction may be reduced to zero.) CORPORATE INCOME — REASON FOR AMENDMENT Check one box indicating the reason for this amended Missouri return. The applicable Federal Form 1139, 1120X, 4549, 4549A, 870AD, and/or 5278 must be attached. This includes consolidated federal/separate Missouri filers. NOTE: A separate amended Form MO-1120 must be filed for each reason. A. MISSOURI CORRECTION ONLY B. FEDERAL CORRECTION C. LOSS CARRYBACK PART F. MISSOURI TAX CREDIT CARRYBACK* □ D. FEDERAL TAX CREDIT CARRYBACK □ E. IRS AUDIT (RAR) **DOR ONLY** *Enter on Part 5. Line 1 the first year that the credit became available. LOSS CARRYBACK OR FEDERAL TAX CREDIT CARRYBACK — AMENDED RETURN ONLY If a loss carryback or federal tax credit carryback is involved in this amended return, complete the following section. Consolidated federal/separate Missouri filers should report figures attributable to this separate Missouri return and attach a copy of the Federal Consolidated Form 1139 or 1120X showing the carryback or page 1 of the Federal Consolidated Form 1120 for the year of the loss to verify that only the separate company had the loss. Also, enclose a copy of the consolidated income statement for this year and the year of the loss. (If NOL or Missouri tax credit carryback, enter year that the credit first became available.) M M D D 'n 00 3. Total net operating loss carryback 3 00

Federal income tax adjustment — Consolidated federal/separate Missouri filers must attach computations.

00



SCHEDULE MO-FT

Attachment Sequence No. 1120-03 and 1120S-01

Schedule MO-FT must be filed with the Form MO-1120 or Form MO-1120S.

CC	DRPORATION NAME	MO TAX I.D. NUMBER CHARTE			CHARTER NUME	ER		FEDERAL I.D. NUMBER		
FIL	E PERIOD BEGINNING (MMDDYY)			20	, ENDING				20	
ВА	LANCE SHEET DATE (MMDDYY)									
	your assets include an interest in a partnership and/or limited rtnership assets.	d liability cor	mpar	ıy? YES 🗌	NO 🗌 If yes	, you ı	must provid	de a detailed reconciliation	on of	
На	s there been a change in your accounting period? YES	NO \square	If yes	s, state prior a	ccounting period _					
	Read instruc NOTE: You cann				g this schedul ranchise tax r		١.			
	Corporations having all assets within Missouri complete Corporations having assets both within and without Miss									
	 Par value of issued and outstanding stock (For no-par value stock, see instructions) (not less than zero) Assets 						1		00	
۷.	2a. Total assets per attached balance sheet 2b. Less: Investments in and advances to subsidiaries over 50% owned (Attach Schedule MO-5071 or a schedule showing name of corporations, percentage of ownership, and amount)						2a		00	
							2b		00	
	2c. Adjusted total (Line 2a less Line 2b)						2c		00	
3.	Allocation per attached balance sheet or schedule (See inst							(B) EVERYWHERE		
	3a. Accounts receivable (net of allowance for bad debt)		3a			00	3a		00	
	3b. Inventories (net, book value)		3b			00	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 Column B) Extend the apportionment percentage to six digits to the right of the decimal point						4			
	Assets apportioned to Missouri (Line 2c times Line 4)						5		00	
0.	6a. Corporations having all assets within Missouri (Line 2c	or Line 1, w	/hiche	ever is greater)		6a		00	
	6b. Corporations having assets both within and without Missouri (Line 5 or the product of Line 1 times Line 4, whichever is greater.) If Line 6a or Line 6b is \$1,000,000 or less, STOP HERE and check Box A on Form MO-1120 or Box A on Form MO-1120S.						6b		00	
7.	Tax Computation 7a. Tax — 1/30th of 1% (.000333 of Line 6a or Line 6b) 7b. Short periods (see instructions) —						7a		00	
	Line 7a x (insert number of whole months in st	hort period)) = F	Prorated Tax D	ue		7b		00	
	7c. Tax due (Line 7a or Line 7b, whichever applies) Enter h Form MO-1120S, Line 16	7c		00						