

Federal Extension - Select this box if you have an approved federal extension.

☐ Amended Return - Select if filing an amended return.

วกา	26 Tayahla yaar hasad on the 2025 calandar year income period	Du	data ^	nril 15, 2026
202 Nam	26 Taxable year based on the 2025 calendar year income period.	1	e date April 15, 2026 yer Identification Number (FEIN)	
valil				
Addr	ress			
City		State		Zip Code
_				
	ng this taxable year, have you been notified of a change in your federal net its for any period? (If yes, submit schedule of changes)			Yes No
۸۵۵	A copy of the federal return and supporting schedule			
	Federal taxable income (loss) from Federal Form 1120, Line 28 or 11:			i
	Form 1065, Line 23 or Schedule C, Line 31		. 1	00
	2. Income from state or political subdivision obligations not included in fe	ederal income		
	(explain if different from tax-exempt interest on the federal return)		. 2	00
	3. Income from federal government securities not included in federal inc	ome	. 3	00
2	4. Charitable contribution claimed on federal return (attach schedule)		. 4	00
	5. Bad debt claimed on federal return (Reserve method Direct w Other)		. 5	00
	6. Net bad debt recoveries		. 6	00
	7. Missouri Credit Institution tax deducted on federal return		. 7	00
-	Taxes deducted on federal return, claimed as credits on this return (must be detailed on Schedule A or attachment)		. 8	00
	Other additions (attach detailed schedule)			00
	10. Total of Lines 1 through 9			00
				<u> </u>
	Net bad debt charge offs Federal income tax deduction (see instructions)			00
				00
	13. Other deductions (attach detailed schedule)		_	00
5	15. Total income before charitable contribution deduction (Line 10 less Line 14)			00
	16. Charitable contribution deduction (limit is 5% of Line 15)			00
	17. Port Cargo Expansion deduction			00
1	18. International Trade Facility deduction			00
	19. Qualified Trade Activities deduction (limit is 50% of Line 10)			00
	20. Taxable income (Line 15 less Line 16, 17, 18, and 19)		. 20	00
	21. Tax at 4.48% of Line 20		. 21	00
	22. Less credits from Line 8			00
	23. Tax due			00
	24A. Less tentative payment or amount previously paid			00
	24B. Overpayment of previous year's tax			00
	24C. Miscellaneous credits complete Tax Credit Schedule, page 2 (attach approved authorizations)			00
	25. Subtotal (see instructions)	•		00
	Skip lines 26 through 28 if you are not filing an amended return.		. 20	
Ĺ	26. Amended return only - Amount paid on original return		. 26	00
	27. Amended return only - Overpayment, if any, shown on original return			00
	28. Amended return only - (Line 26 less line 27)			00
-	29. Balance due or overpaid. (line 25 less line 28 or Enter Line 24 if not a			00
	30. Interest for payment after the original due date (see instructions)			00
	31. Total amount due or overpayment. (Line 29 plus Line 30)			00
	31A. If overpayment, enter the amount to refund			00
	31B. If overpayment, enter the amount to be applied to the next filing period			00

ţ	Description (De not list t	provible personal property toy on legged property)	Amount			
red	Description (Do not list t	angible personal property tax on leased property)	Amount			
e A -						
Schedule A - Claimed As Credits						
Sch						
Taxes		Total (Enter on Lines 8 and 22, Page 1)				
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	Benefit Number Credit Name An					
<u>ө</u>			00			
npe			00			
Sch.			00			
Tax Credit Schedule						
Cre			00			
Гах			00			
			00			
		Total (Enter on Line 24C, Page 1)	00			
	1 List all Missouri office	as or locations for which this return is made. Indicate the complete physical address	including city state			
	List all Missouri offices or locations for which this return is made. Indicate the complete physical address, including city, state, zip code and county of each office or location in which the address is located. Post Office Boxes are not considered physical					
_		ot be accepted. If there are more than 30 locations, please email a list of the location				
atio		, to the Department at the e-mail shown below. Include the percentage of gross inconcome of the company in Missouri. (Attach a separate page if additional space is nee				
rms	location to the total ii	icome of the company in Missouri. (Attach a separate page if additional space is nee	;ueu.)			
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nal						
Complete Additional Information	2. Is this return made on the basis of actual receipts and disbursements? If not, describe fully what other basis or method					
Adc	was used in compu					
ete						
mpl						
3. What is the principal source of income?						
	4. If the business is a	pawnbroker, what percent of the total business is your loan business?				
	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					
		ry, I declare that I have examined this return, including accompanying schedules				
inre	the best of my knowledg	e and belief, it is true, complete, and correct. Declaration of preparer (other than				
gnaí	all information of which I	ne or she has any knowledge.				
Si	Signature	Printed Name				
and	of Officer	of Officer				
ion	Telephone Number	Date Signed (MM/DD/YY)				
izat	Preparer's Signature	Preparer's FEIN,				
Authorization and Signature	(Including Internal Preparer)	SSN, or PTIN				
Aut	Telephone	Date Signed				
	Number	(MM/DD/YY)				
	Email					
	Address					

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.

E-mail: fit@dor.mo.gov

Mail to: Taxation Division

P.O. Box 898

Jefferson City, MO 65105-0898

Phone: (573) 751-2326 **Fax:** (573) 522-1720 **TTY:** (800) 735-2966



Form 2823 (Revised 12-2025)

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

Ever served on active duty in the United States Armed Forces?

If yes, visit <u>dor.mo.gov/military/</u> to see the services and benefits DOR offers to all eligible military individuals, or complete the survey at <u>mvc.dps.mo.gov/MoVeteransInformation/Survey/DOR</u> to receive information from the Missouri Veterans Commission. A list of all state agency resources and benefits can be found at <u>veteranbenefits.mo.gov/state-benefits/</u>.

Section148.120 - 148.230, RSMo

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

The Form 2823 must be completed and filed by April 15, 2026 (tax becomes delinquent after this date and is subject to interest). An extension of time to file this return may be obtained from the Department of Revenue upon written request. Such request should indicate the extension period requested, the reason for the request and must be accompanied by a tentative return and payment for the estimated tax due. An extension of time to file the return does not extend the time for payment of the tax. An extension of time may not exceed 180 days from the original due date pursuant to Regulation 12 CSR 10-10.090.

<u>Filing Requirement</u> — Every person, firm, partnership, or corporation engaged principally in the consumer credit or loan business in the making of loans of money, credit, goods, or things in action, or in the buying, selling or discounting of, or investing in, negotiable or non-negotiable instruments given as security for or in payment of the purchase price of consumer

goods exercising such franchise within the state of Missouri, but shall not include real estate mortgage loan companies, banks, trust companies, credit unions, insurance companies, mutual savings and loans associations and savings and loan associations.

Credit Institution Tax Return — If any taxpayer shall operate more than one office in Missouri, the taxpayer shall file one return giving the physical address of each such office and allocating to each office its share of the net income of the taxpayer in the ratio that the gross receipts of that office bears to the total gross receipts of the taxpayer. For each address include the county in which the address is located in. Post Office Boxes are not physical locations and will not be accepted. If there are more than 30 locations, please email a list of the locations in a spread-sheet, along with this return, to the Department at the e-mail shown at the bottom of the return.

Instructions

Amended Return: Select the box at the top of the form if filing an amended return.

<u>Federal Extension</u>: Select the box at the top of the form indicating you have an approved federal extension. Attach a copy of the extension to this return.

Part 1

<u>Line 1</u> Taxpayers that are members of an affiliated group filing a consolidated federal income tax return shall compute federal taxable income as if a separate federal tax return had been filed. A pro forma federal return or appropriate schedules should then be attached together with a copy of pages 1 through 4 of the consolidated federal income tax return.

<u>Line 2</u> Enter all income received on state or political subdivision obligations excluded from the federal return. This income is taxable on this return. Explain if different from tax-exempt interest shown on the federal return.

 $\underline{\text{Line 3}}$ Enter all income received on federal securities excluded from the federal return (e.g., non-taxable portion Federal Reserve Bank dividends). This income is taxable on this return.

<u>Line 4</u> Enter the charitable contribution deduction claimed on the federal return.

<u>Line 5</u> 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.

 $\underline{\text{Line 6}}$ Enter the excess, if any, of recoveries of bad debts previously charged off over current year charge offs. Attach schedule of bad debt computation.

<u>Line 7</u> Enter any Missouri Credit Institution tax deducted on the federal return. This is not an allowable deduction on this return.

<u>Line 8</u> Enter here and on Line 22 taxes to be claimed as credits on this return. All taxes paid directly to the state of Missouri or

any political subdivision thereof are eligible except taxes on real estate, unemployment taxes, credit institution tax, and taxes on tangible personal property owned by the taxpayer and held for lease or rental to others. Show detail on Schedule A.

Attach schedule of taxes deducted on Federal Form 1120, Line 17 or Form 1120S, Line 12 or Form 1065, Line 14 or Form 1040, Schedule C, Line 23 for verification purposes.

An accrual basis taxpayer that is a member of an affiliated group filing a consolidated Missouri income tax return shall allocate a portion of the consolidated Missouri income tax liability for the year by multiplying such liability by a fraction, the numerator of which is the separate Missouri taxable income of such member, and the denominator of which is the sum of the separate Missouri taxable incomes of all members having Missouri taxable income for the year.

A cash basis taxpayer that is a member of an affiliated group filing a consolidated Missouri income tax return shall allocate each component of the consolidated Missouri income tax paid (or refunded) during the year by multiplying each component by a fraction, the numerator of which is the separate Missouri taxable income of such member for the applicable year, and the denominator of which is the sum of the separate Missouri taxable incomes of all members having Missouri taxable income for the applicable year.

In the computation of separate Missouri taxable income, each member of a group filing a consolidated Missouri income tax return shall start with its separate federal taxable income as computed pursuant to the method applicable to the group under Treasury Regulation 1.1552-1. The amount of the federal income tax deduction of each member under Section 143.171.1, RSMo, shall be that portion of the actual federal consolidated income tax liability of the group as is required to be allocated to such member under Internal Revenue Code Section 1552 without regard to any additional allocations under Treasury Regulation 1.1502-33(d).

<u>Line 9</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 schedule). Include all income shown on Federal Form 1120S, Schedule K, Lines 2-10. The environmental tax under Section 59A of the Internal Revenue Code must be added back to income.

Line 10 Enter the total of Lines 1 through 9.

Part 2

<u>Line 11</u> Enter the excess, if any, of bad debt charge offs over current year recoveries. Attach schedule of bad debt computation.

<u>Line 12</u> Enter the current year deduction for federal income tax related to the Credit Institution tax. 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. Attach a schedule of the computation.

Accrual basis taxpayers that are members of an affiliated group filing a consolidated federal income tax return shall allocate a portion of the consolidated federal tax liability for the year by using the same method used by the group under Internal Revenue Code Section 1552 without regard to any additional allocations under Treasury Regulation 1.1502-33(d).

Cash basis taxpayers that are members of an affiliated group filing a consolidated federal income tax return shall allocate each component of the consolidated federal tax paid (or refunded) during the year by using the same method used 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).

<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 of Lines 11 through 13.

<u>Line 15</u> Subtract Line 14 from Line 10 and enter amount. If "loss", indicate by brackets "()" and enter "none" on Line 21.

<u>Line 16</u> Enter the charitable contribution claimed on this return. The contribution deduction is limited to 5% of taxable income before the contribution deduction. Only current year contributions are allowed. Attach a schedule.

<u>Line 17</u> Enter the amount of the Port Cargo Expansion deduction approved by the Missouri Department of Economic Development. Attach a copy of the certificate authorizing the deduction.

<u>Line 18</u> Enter the amount of the International Trade Facility deduction approved by the Missouri Department of Economic Development. Attach a copy of the certificate authorizing the deduction.

<u>Line 19</u> Enter the amount of the Qualified Trade Activities deduction approved by the Missouri Department of Economic Development. Attach a copy of the certificate authorizing the deduction. The amount of the deduction cannot exceed fifty percent (50%) of Line 10.

<u>Line 20</u> Subtract Line 16, 17, 18 and 19 from Line 15 and enter amount.

Part 3

<u>Line 21</u> Multiply the taxable income amount on Line 20 by 4.48% and enter the amount.

Line 22 Enter the amount from Line 8.

<u>Line 23</u> Subtract Line 22 from Line 21 and enter amount. If amount on Line 22 exceeds amount on Line 21, enter "none".

<u>Line 24A</u> Enter the amount of tentative payment, if applicable.

Line 24B Enter overpayment of previous year's tax.

<u>Line 24C</u> Enter the amount of tax credits claimed from the list on the following page. Attach a schedule listing the amounts for each tax credit. A copy of the approved authorization must be attached to the return.

Line 25 Subtract Lines 24A through 24C from Line 23.

<u>Line 26</u> Amended return only: Enter payment(s) applied to your original filed return, including payments applied to penalties and interest. If not filing an amended return, go to line 28.

<u>Line 27</u> Amended return only: Enter the overpayment claimed or adjusted on your original return.

<u>Line 28</u> Subtract Line 27 from Line 26. If this is not an amended return, enter zero.

Line 29 Subtract Line 28 from Line 25.

<u>Line 30</u> Calculate interest for period which tax payment is delinquent. Interest should be calculated from the original due date of April 15 through date of payment at the annual rate. The annual interest rate can be obtained from the Department's website at: <a href="document-doc

<u>Line 31</u> Enter the total of Lines 29 and 30. If a balance due, submit this amount. If an overpayment, indicate the amount to be refunded on Line 31A or the amount to be applied to the next filing period on Line 31B.

<u>Line 31A</u> Enter the amount of overpayment from Line 31 to be refunded.

<u>Line 31B</u> Enter the amount of overpayment from Line 31 to be applied to the next filing period.

Available Tax Credits

Mail to:

Affordable Housing Assistance
Agricultural Products Utilization
Bond Enhancement
Brownfield "Jobs and Investment"
Business Use Incentives for
Large-scale Development (BUILD)
Capitol Complex - Artifact Donation
Capitol Complex - Monetary Donation
Development
Development Reserve
Developmental Disability Care Provider
Export Finance

Family Development Account

Jefferson City, MO 65105-0898

Taxation Division

P.O. Box 898

Family Farms Act
Historic Preservation
Infrastructure Development
Innovation Campus
Intern and Apprentice Recruitment
Maternity Home
Missouri Low Income Housing
Missouri Quality Jobs
Missouri Works
Neighborhood Assistance
New Enhanced Enterprise Zone
New Generation Cooperative
Pregnancy Resource

Rebuilding Communities and
Neighborhood Preservation Act
Remediation
Research Expense Credit
Residential Treatment Agency
Shelter for Victims of Domestic
Violence
Small Business Incubator
Special Needs Adoption
Sporting Contribution
Sporting Event
Youth Opportunities

E-mail: fit@dor.mo.gov

Form 2823 Instructions (Revised 12-2025)

Visit <u>dor.mo.gov/taxation/business/tax-types/finance/</u> for additional information.

Ever served on active duty in the United States Armed Forces?

If yes, visit <u>dor.mo.gov/military/</u> to see the services and benefits DOR offers to all eligible military individuals, or complete the survey at <u>mvc.dps.mo.gov/MoVeteransInformation/Survey/DOR</u> to receive information from the Missouri Veterans Commission. A list of all state agency resources and benefits can be found at <u>veteranbenefits.mo.gov/state-benefits/</u>.

Phone: (573) 751-2326 Fax: (573) 522-1720 TTY: (800) 735-2966

