



MISSOURI DEPARTMENT OF REVENUE 2025 Corporation Income Tax Return

Department Use Only

Department Use Only (MM/DD/YY) grid

Department Use Only (MM/DD/YY)

Department Use Only (MM/DD/YY) grid

Missouri Tax I.D. Number

Missouri Tax I.D. Number grid

Missouri Corporation Income Tax Return for 2025

Beginning (MM/DD/YY)

Beginning (MM/DD/YY) grid

Ending (MM/DD/YY)

Ending (MM/DD/YY) grid

Federal Employer I.D. Number

Federal Employer I.D. Number grid

Charter Number

Charter Number grid

Corporation Name

Corporation Name text box

Address

Address text box

City

City text box

State

State dropdown

ZIP

ZIP text box



25111010001

Select this box if you have an approved federal extension. Attach a copy of the approved Federal Extension (Form 7004).

Select applicable boxes. Failure to select the address change box may result in mailings going to the last address on file.

- Consolidated MO Return, Consolidated Federal and Separate Missouri Return, Amended Return, Name Change, Address Change, Final Return and Close Corporation Income Tax Account, Bankruptcy, 1120C, 990T, All Missouri source income is from an interest(s) in a partnership(s), Public Law 86-272

Computation of Income Tax

Table with 13 rows for tax computation, including Federal taxable income, Missouri modifications, and Missouri taxable income.

Tax

14. Corporation income tax - 4% of Line 13. 14 [] .00

15. Recapture of Missouri low income housing credit - Attach a copy of Federal Form 8611 (see instructions) 15 [] .00

16. Total tax - Add Lines 14 and 15 16 [] .00

Credits and Payments

17. Tax credits - Attach **Form MO-TC** 17 [] .00

18. Estimated tax payments - Include approved overpayments applied from previous year..... 18 [] .00

19. Payments with **Form MO-7004**..... 19 [] .00

20. **Amended return only** - Tax paid with (or after) the filing of the original return 20 [] .00

21. Subtotal - Add Lines 17 through 20 21 [] .00

22. **Amended return only** - Overpayment, if any, as shown on original return or as later adjusted 22 [] .00

23. Total - Line 21 minus Line 22 23 [] .00

24. If Line 23 is more than Line 16, enter overpayment here 24 [] .00

25. Amount remitted or amount of tax overpayment to be contributed to the funds listed below ... 25 [] .00

MO Medal of Honor Fund	Children's Trust Fund	Veterans Trust Fund	Elderly Home Delivered Meals Trust Fund	Missouri National Guard Trust Fund	Workers' Memorial Fund	Childhood Lead Testing Fund	Missouri Military Family Relief Fund	General Revenue Fund	Organ Donor Program Fund	Kansas City Regional Law Enforcement Memorial Foundation Fund	Soldiers Memorial Military Museum in St. Louis Fund	Additional Fund Code (See Instr.)	Additional Fund Code (See Instr.)
.00	.00	.00	.00	.00	.00	.00	.00	.00	.00	.00	.00	.00	.00

Refund or Tax Due

26. Amount of Line 24 to be applied to your 2026 estimated tax..... 26 [] .00

27. **REFUND** - Line 24 minus Lines 25 and 26..... 27 [] .00

28. If Line 23 is less than Line 16, enter underpayment here 28 [] .00

29. Enter the total from boxes, A, B, and C below on Line 29 29 [] .00

A. Interest [] .00 B. Penalty [] .00 C. MO-2220 [] .00

30. **AMOUNT DUE** - Add Lines 28 and 29 (U.S. funds only) 30 [] .00

If you pay by check, you authorize the Department of Revenue to process the check electronically. Any returned check may be presented again electronically. Under penalties of perjury, I declare that the above information and any attached supplement is true, complete, and correct.

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 S E F

I authorize the Director of Revenue or delegate to discuss my return and attachments with the preparer or any member of their firm, or if internally prepared, any member of the internal staff. Yes No

Signature

Signature of Officer [] Printed Name []

Telephone Number [] Date Signed (MM/DD/YY) [] [] [] []

Preparer's Signature (Including Internal Preparer) [] Preparer's FEIN, SSN, or PTIN [] [] [] [] [] [] [] [] [] []

Telephone Number [] Date Signed (MM/DD/YY) [] [] [] []

Did you pay a tax return preparer to complete your return, but they failed to sign the return or provide their Internal Revenue Service preparer tax identification number? If you marked Yes, please insert their name, address, and phone number in the applicable sections of the signature block above. Yes No



Part 1 - Missouri Modifications - Additions

1a. State and local bond interest (except Missouri)	1a	<input type="text"/>	<input type="text"/>	.00
1b. Related expenses (omit if less than \$500) - Enter Line 1a minus Line 1b on Line 1	1b	<input type="text"/>	<input type="text"/>	.00
2. Fiduciary and partnership adjustment - Enter share of adjustment from Form MO-1041 , Part 1, Line 19 or Form MO-1065 , Line 11	2	<input type="text"/>	<input type="text"/>	.00
3. Net operating loss modification from Form MO-5090 (do not enter NOL carryover).....	3	<input type="text"/>	<input type="text"/>	.00
4. Donations claimed for the Food Pantry Tax Credit that were deducted from federal taxable income.	4	<input type="text"/>	<input type="text"/>	.00
5. Business interest expense carryforward	5	<input type="text"/>	<input type="text"/>	.00
6. Total - Add Lines 1 through 5. Enter here and on page 1, Line 3.....	6	<input type="text"/>	<input type="text"/>	.00

Part 2 - Missouri Modifications - Subtractions

1a. Interest from exempt federal obligations - Attach a detailed schedule	1a	<input type="text"/>	<input type="text"/>	.00
1b. Related expenses. (omit if less than \$500) - Enter Line 1a minus Line 1b on Line 1	1b	<input type="text"/>	<input type="text"/>	.00
2. Federally taxable - Missouri exempt obligations	2	<input type="text"/>	<input type="text"/>	.00
3. Agriculture disaster relief	3	<input type="text"/>	<input type="text"/>	.00
4. Previously taxed income	4	<input type="text"/>	<input type="text"/>	.00
5. Amount of any state income tax refund included in federal taxable income	5	<input type="text"/>	<input type="text"/>	.00
6. Capital gain exclusion from the sale of low income housing project	6	<input type="text"/>	<input type="text"/>	.00
7. Fiduciary, partnership, and other adjustments (see instructions)	7	<input type="text"/>	<input type="text"/>	.00
8. Missouri depreciation basis adjustment	8	<input type="text"/>	<input type="text"/>	.00
9. Subtraction modification offsetting previous addition modification from a net operating loss deduction from an applicable year (only enter previously disallowed NOL carryback)	9	<input type="text"/>	<input type="text"/>	.00
10. Depreciation recovery on qualified property that is sold	10	<input type="text"/>	<input type="text"/>	.00
11. Build America and recovery zone bond interest.....	11	<input type="text"/>	<input type="text"/>	.00
12. Missouri public-private partnerships transportation act.....	12	<input type="text"/>	<input type="text"/>	.00
13. Disallowed business interest expense	13	<input type="text"/>	<input type="text"/>	.00
14. Total - Add Lines 1 through 13. Enter here and on Page 1, Line 5.....	14	<input type="text"/>	<input type="text"/>	.00



Part 3 - Federal Income Tax - Current Year

Consolidated federal and separate Missouri return (see instructions)

1. Federal tax from Federal Form 1120, Schedule J, Line 12.....	1	<input type="text"/>	.00
2. Foreign tax credit from Federal Form 1120, Schedule J, Line 5a.....	2	<input type="text"/>	.00
3. Federal income tax - Add Lines 1 and 2. Multiply the total by 50%; and enter here and on page 1, Line 7.	3	<input type="text"/>	.00
Consolidated federal and separate Missouri returns must complete Lines 4 through 6.			
4. Numerator - Enter the amount of separate company federal taxable income	4	<input type="text"/>	.00
5. Denominator - Enter the total positive separate company federal taxable income	5	<input type="text"/>	.00
6. Divide Line 4 by Line 5. <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Multiply by Line 3. Enter here and on Page 1, Line 7. Consolidated federal and separate Missouri return filers must attach consolidated Federal Form 1120, Schedule J, and an income statement or summary of profit companies. If information is not sent, the federal income tax deduction may be reduced to zero.	6	<input type="text"/>	.00

Part 4 - Amended Reason

If this is an amended return, select one box indicating the reason. A separate Form MO-1120 must be filed for each reason.

- A. Missouri correction only B. Federal correction C. Loss carryback (complete Part 5)
- D. Federal tax credit carryback E. IRS audit (RAR)
- F. Missouri tax credit carryback - Enter on Part 5, Line 1 the first year that the credit became available.

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Part 5 - Amended Return Loss Carryback or Federal Tax Credit Carryback

If this is an amended return and if a loss carryback, federal tax credit carryback or Missouri tax credit carryback is involved in this amended return, complete the following section. Consolidated federal and separate Missouri filers should report figures attributable to this separate Missouri return and attach a copy of the federal consolidated amended Form 1139 or Form 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. Enclose a copy of the consolidated income statement for this year and the year of the loss. If NOL, federal tax credit carryback or Missouri tax credit carryback, enter year that the loss or credit first became available.

		M M D D Y Y	
1. Year of loss or credit	1	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	
2. Total net capital loss carryback.....	2	<input type="text"/>	.00
3. Total net operating loss carryback	3	<input type="text"/>	.00
4. Federal income tax adjustment - Consolidated federal and separate Missouri filers must attach computations	4	<input type="text"/>	.00

Mail To:

E-mail: corporate@dor.mo.gov

Balance Due:

Missouri Department of Revenue
PO Box 3365
Jefferson City, MO 65105-3365

Visit: dor.mo.gov/taxation/business/tax-types/corporation-income/ for additional information.

Phone: (573) 751-4541
Fax: (573) 522-1721

Refund or No Amount Due:

Missouri Department of Revenue
PO Box 700
Jefferson City, MO 65105-0700

