		Department Use Only										
2	For	rm REVENUE (MM/DD		e Onl	у							
_		-1120 2024 Corporation Income Tax Return	,,,,		souri 7							\square
L		Missouri Corporation Income Beginning Tax Return for 2024 (MM/DD/YY)	Endi (MM		Numb (Y)	ber					1	<u> </u>
I.D.	Numl porati											
Add	ress											
City ZIP						24	41110)1000 ⁻		State		
	Se	elect this box if you have an approved federal extension. Attach a copy of the a	pprov	ed Fe	edera	al Ext	tensi	on (F	orm [·]	7004).		
Sel	1	applicable boxes. Failure to select the address change box may result in mailing		_					7			
		onsolidated MO Return L Consolidated Federal and Separate Missouri Retur	n L	_	meno			n∟ ⊐	N	ame C	hang	je
	1	ddress Change 🔲 Final Return and Close Corporation Income Tax Accour	nt ∟	⊔B	ankri	uptcy	/	<u> </u>	20C		990)T
	All	I Missouri source income is from an interest(s) in a partnership(s)	Law 8	6-272	2							
	1.	Federal taxable income from Federal Form 1120, Line 30				1						00
		Corporation income tax from Missouri, or other states, their subdivisions, and I Columbia deducted in determining federal taxable income	Distric	t of		2						00
	3.	Missouri modifications - Additions (complete Page 3, Part 1)				3					٦.	00
		Total additions - Add Lines 2 and 3				4						00
		Missouri modifications - Subtractions (complete Page 3, Part 2)				5						00
ах		Balance - Line 1 plus Line 4 minus Line 5				6						00
Computation of Income Tax		Federal income tax - Current year (complete Page 4, Part 3)				7						00
of Inco		Taxable income - All sources - Line 6 minus Line 7				8						00
tion o	9.	Preliminary Missouri taxable income - If all Missouri income, enter amount from					ete ar	nd att	ach 🛛	Form N	 //O-N	
nputa												
Con		Method Percent Multiply Line 8 by the percent		-		9						00
	10.					10						00
		Enterprise zone or rural empowerment zone income modification				11					 	00
	12.	RESERVED				12						00
	13.	Missouri taxable income - Line 9 minus Lines 10 and 11.				13						00

Тах	 14. Corporation income tax 15. Recapture of Missouri lo (see instructions) 	ow income housi	ng credit - At	tach a cop	y of Feder	al Form 8	611]. <u>00</u>]. 00	-
	16. Total tax - Add Lines 14	and 15						. 16			. 00]
	17. Tax credits - Attach For	<u>m MO-TC</u>						17			. 00	
s	18. Estimated tax payments - Include approved overpayments applied from previous year							18			. 00	
Credits and Payments	19. Payments with Form MO-7004.							19			. 00]
	20. Amended return only	- Tax paid with (or after) the	filing of the	original re	eturn		20			. 00]
redits a	21. Subtotal - Add Lines 17	through 20						21			. 00	
ပ	22. Amended return only	- Overpayment, i	if any, as sho	wn on orig	inal return	or as late	er adjusted	22			. 00	
	23. Total - Line 21 minus Li	ne 22						23			. 00	
	24. If Line 23 is more than I	Line 16. enter ov	erpavment h	ere				. 24			00]
	24. If Line 23 is more than Line 16, enter overpayment here25. Amount remitted or amount of tax overpayment to be contributed to the funds listed below							25			. 00	-
đ	MO Medal of Honor Fund Children's Trust Fund Trust Fund	Elderly Home Delivered Meals	issouri ational Guard Memorial	(FA)	Missouri Military Family Relief Fund	General Revenue Revenue Revenue Fund	Organ Donor Program Fund	Kansas City Regiona Law Enforcement Memorial Foundation Fund	Museum in St. Louis Fund	Additional Fund Code (See Instr.)	Additio Fund C (See Ir	Code
Refund or Tax Due	00 00 0	0 00	00 0	00	00	00	00	00		00		0
	26. Amount of Line 24 to be	applied to your	2025 estima	ted tax				26			. 00	
sefunc	27. REFUND - Line 24 minus Lines 25 and 26							27			. 00	
Ľ.	28. If Line 23 is less than Li	ne 16, enter und	lerpayment h	ere				28			. 00	
	29. Enter the total from boxes, A, B, and C below on Line 29							29			. 00	
	A. Interest	B. 00 Penalty		. 00	C. MO-2220	0		00				
	30.AMOUNT DUE - Add Li	nes 28 and 29 (l	J.S. funds on	ly)				30			. 00]
	If you pay by check, you aut returned check may be prese information and any attached s	ented again electro	onically. Unde	r penalties			,	,	Departm	ent Use (Dnly]F	
	I authorize the Director of Reve member of their firm, or if inter								🗌 Y	′es	No	
e	Signature of Officer				Printed Name							
Signature	Telephone					ate Signed						
Sigr	Number Preparer's Signature				_l (N Preparer's F	/IM/DD/YY) EIN,						٦
	(Including Internal Preparer)				SSN, or PTI	N						
	Telephone					ate Signed /IM/DD/YY)						
	Did you pay a tax return prepa Service preparer tax identificat										1	
	the applicable sections of the s	signature block abo								′es	No	
Vla	ailing instructions of	on page 4								MO-1120	Page 2	2

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	1a. State and local bond interest (except Missouri)	1a	00		
Part 1 - Missouri Modifications - Additions	1b. Related expenses (omit if less than \$500) - Enter Line 1a minus	1b	00	1	. 00
	 Fiduciary and partnership adjustment - Enter share of adjustme Part 1, Line 19 or Form MO-1065, Line 11 	2	. 00		
	 Net operating loss modification from Form MO-5090 (do not Donations claimed for the Food Pantry Tax Credit that were do 		. 00		
Mo	5. Business interest expense carryforward			4 5	. 00
	6. Total - Add Lines 1 through 5. Enter here and on page 1, Lin				. 00
	1a. Interest from exempt federal obligations - Attach a detailed schedule	1a	00		
	1b. Related expenses. (omit if less than \$500) - Enter Line 1a minus Line 1b on Line 1	1b	00	1	. 00
Part 2 - Missouri Modifications - Subtractions	2. Federally taxable - Missouri exempt obligations			2	. 00
	3. Agriculture disaster relief			3	. 00
	4. Previously taxed income			4	. 00
	 Amount of any state income tax refund included in federal tax Capital gain exclusion from the sale of low income housing p 			6	. 00
	 Fiduciary, partnership, and other adjustments (see instructions) 			7	. 00
	 8. Missouri depreciation basis adjustment 				. 00
	9. Subtraction modification offsetting previous addition modification deduction from an applicable year (only enter previously disa			9	. 00
	10. Depreciation recovery on qualified property that is sold			10	. 00
	11. Build America and recovery zone bond interest				. 00
	12. Missouri public-private partnerships transportation act			12	. 00
	13. Disallowed business interest expense			13	. 00
	14. Total - Add Lines 1 through 13. Enter here and on Page 1, Li	ine 5		14	. 00

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MO-1120 Page 3

	Consolidated federal and separate Missouri return (see instructions)							
: Year	1. Federal tax from Federal Form 1120, Schedule J, Line 12	1					<u> </u>	00
Current	2. Foreign tax credit from Federal Form 1120, Schedule J, Line 5a	2						00
Part 3 - Federal Income Tax - Current Year	 Federal income tax - Add Lines 1 and 2. Multiply the total by 50%; and enter here and on page 1, Line 7. Consolidated federal and separate Missouri returns must complete Lines 4 through 6. Numerator - Enter the amount of separate company federal taxable income Denominator - Enter the total positive separate company federal taxable income Divide Line 4 by Line 5. Multiply by Line 3. Enter here and on I 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. 		1,				 	00
	If information is not sent, the federal income tax deduction may be reduced to zero							00
Part 4 - Amended Reason	If this is an amended return, select one box indicating the reason. A separate Form MO-1120 A. Missouri correction only B. Federal correction C. Loss carryback (complete Complete	olete ame ame	Par ava	rt 5) ailable			≥asor	ı.
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 in this amended return, complete the following section. Consolidated federal and separate M ures attributable to this separate Missouri return and attach a copy of the federal consolidated 1120X showing the carryback or page 1 of the federal consolidated Form 1120 for the year of separate company had the loss. Enclose a copy of the consolidated income statement for thi If NOL, federal tax credit carryback or Missouri tax credit carryback, enter year that the loss of	/lisso d am of the s yea	ouri end los ar ai	filers ed Fo s to v nd the irst be	shou orm 1 verify e yea	ild repo 139 oi that oi ir of the	ort fig r Forr nly th e loss	g- m ne s.
ded Re	1. Year of loss or credit	1						
- Amen r Federa	2. Total net capital loss carryback	2						00
Part 5	3. Total net operating loss carryback	. 3						00
	4. Federal income tax adjustment - Consolidated federal and separate Missouri filers must attach computations	4					□.	00
Mail T	o: E-mail: <u>corporate@dor.mo.gov</u>			Form	MO-11	120 (Revi	ised 12-	-2024)
	e. Due: Visit: dor.mo.gov/taxation/business/tax-types/corporation-	inco	me/	for a	dditic	nal inf	orma	ition

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

Refund or No Amount Due:

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

Balance Due:

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

