2	Form MO-BTC Bank Tax Credit for S Corpo	ration Shareholder	Department (MM/DD/YY)	-				
-[	Reportin (MM/YY							
Shareholder	Missouri Tax I.D. Number Social		ral Employer					
	Security Number							
	Shareholder's Name							
	Address	City		State		ZIP Code		
Corporation	Missouri Tax I.D. Number	Federal E						
	Corporation's Name							
0	Address	City		State		ZIP Code		
Bank Tax Credit: Shareholders of S corporations that are banks or bank holding companies, savings & loan associations, and credit institutions are allowed to take a tax credit that is equal to their pro rata share of the financial institution tax paid by the S corporation.								
If you are filing a joint Missouri Individual Income Tax Return, the Bank Tax Credit will only be applied against the tax liability of the taxpayer listed as a shareholder of the S corporation.								
1.	Enter the tax amount from one of the following Bank Franchise Tax Amount (from Form INT-2							
	Savings & Loan Association Tax Amount (from Form INT-3, Line 21)				1			00
	Credit Institution Tax Amount (from Form 2823	s, Line 23)						00
2.	Enter Ownership Percentage		2			%		
3.	Bank Tax Credit - Multiply Line 1 by Line 2. Enter on the Form MO-TC.							
	If this credit amount exceeds the Missouri income tax liability, the remaining credit may be carried forward 5 years				3			00
Signature	I am aware of any applicable reporting requirements of <u>Section 135.805 RSMo</u> and the penalty provisions of <u>Section 135.810 RSMo</u> . Pursuant to <u>Section 105.1500, RSMo</u> , the Department of Revenue is prohibited from requiring any entity exempt from federal income tax under Section 501(c) of the Internal Revenue Code, or any individual, to provide the Department with any list, record, register, registry, roll, roster, or other compilation of data of any kind that directly or indirectly identifies a person as a member, supporter, volunteer of, or donor of financial or nonfinancial support to, any entity exempt from federal income tax under Section 501(c) of the Internal Revenue Code. Nothing in this form should be read or understood as a requirement that you provide any such information. Notwithstanding any publication, webpage, form, instruction, regulation, or statement shared by the Department, you are not required to include such information on this form. If you encounter any technical difficulty in submitting this form without including information that you believe is protected by Section 105.1500, RSMo, feel free to contact the Department by email at <u>corporate@dor.mo.gov</u> or by phone at 573-751-4541.							
	Taxpayer's Signature Printed Name				Date (MM/DD/YYYY)			
A ++ o	ch your completed Form MO-BTC with your Missouri I	Income Tex Deturn Ales		TC appiag of F	adaral C			

Attach your completed Form MO-BTC with your Missouri Income Tax Return. Also enclose Form MO-TC, copies of Federal Schedule K-1, and a copy of one of the following returns: Missouri Bank Franchise Tax Return, Savings & Loan Association Tax Return, or Credit Institutions Tax Return.

Mail to: Taxation Division P.O. Box 27 Jefferson City, MO 65105-0027

 Phone:
 (573) 751-3220

 Fax:
 (573) 522-8619

 TTY:
 (800) 735-2966



E-mail: <u>taxcredit@dor.mo.gov</u>

Form MO-BTC (Revised 09-2022)

Visit dor.mo.gov/tax-credits/btc.html 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 we offer to all eligible military individuals. A list of all state agency resources and benefits can be found at veteranbenefits.mo.gov/state-benefits/.

